

# Victims of Child Sexual Abuse: Who's Responsible and Who's Believable?

By

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## Victims of Child Sexual Abuse: Who's Responsible and Who's Believable?

By Alanna Howell

### **Abstract**

This thesis investigates whether perpetrator-victim and counsellor characteristics influence counsellors' views of victim responsibility and credibility. Counsellors (n=149) surveyed by mail and over the internet read a vignette describing an incident of CSA, completed a 12-question survey along a 7-point Likert-type scale, responded to 2 open-ended discussion questions, and completed a demographic survey. Results from a logistic regression analysis found that: victim gender predicted views of victim responsibility for boys; more years of counselling experience predicted the disbelief of CSA disclosures; and more years experience counselling CSA clients predicted credibility of CSA disclosures. Early feminist works on CSA are used to argue that transgressions of gender norms elicit interpretations of victims that realign their behaviour with patriarchal ideals of femininity and masculinity. However, the existence of various gender pairings of perpetrator-victim relationships suggest that my findings support a revised view of patriarchy that is more in line with intersectional feminist literature.

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## Table of Contents

	Page
Abstract .....	i
Acknowledgements.....	ii
List of appendices .....	v
List of tables.....	vi
List of graphs .....	viii
 CHAPTER 1: INTRODUCTION.....	 1
 CHAPTER 2: PUTTING VIEWS OF CSA AND ITS VICTIMS INTO CONTEXT: ORIGINS OF THE CONCEPT	
<b>Freud: Incest Produces A Fractured Mind .....</b>	<b>7</b>
<b>Kinsey: The Sexualization of Incest, CSA and its Victims.....</b>	<b>10</b>
<b>Kempe: Sexual Trauma Produces a Fractured Body.....</b>	<b>12</b>
<b>Feminist Critique: Incest and CSA Reflect Larger Social     Struggles.....</b>	<b>13</b>
<b>Mainstream Research on CSA: Feminist Friendly?.....</b>	<b>19</b>
<b>Summary.....</b>	<b>21</b>
 CHAPTER 3: BLAMING BABES: COUNSELLORS' VIEWS OF CSA VICTIMS	
<b>Girls as Victims</b>	
Seductive Girls: 1920s to 1960s .....	23
Participant Victims:1950s to 1990s .....	27
Girls As Liars: 1980s to Present .....	31
<b>Boys as Victims.....</b>	<b>39</b>
Does Perpetrator Gender Influence Perceptions of Victim Credibility and Responsibility When Victims Are Boys? .....	40
<b>Summary.....</b>	<b>44</b>
 CHAPTER 4: METHODOLOGY	
<b>Conducting Feminist Research with Quantitative Methods:     Possible or Problematic? .....</b>	<b>47</b>

<b>Methods</b>	
Sample.....	53
Participation packages .....	54
Consent forms .....	54
Measures .....	55
Ethical considerations .....	59
<b>CHAPTER 5: RESULTS</b>	
<b>Descriptive Statistics</b>	
Survey Return Rate .....	61
Demographic Distribution of Sample .....	65
Description of Dependent Variables .....	67
Description of Independent Variables .....	73
Summary .....	79
<b>Predicting Counsellors' Views of Victim Responsibility and Victim Credibility: Logistic Regression Analysis.....</b>	<b>84</b>
Assumptions check .....	86
Inferential tests.....	88
Summary.....	95
<b>CHAPTER 6: CONCLUDING REMARKS: MAKING SENSE OF THE DATA</b>	
<b>In Their Own Words: Counsellors' Comments on Victim Responsibility and Credibility .....</b>	<b>97</b>
<b>What Does it All Mean?</b>	
Who's Responsible and Who's Believable?: A Discussion of the Logistic Regression Findings.....	101
- <i>Counsellors View Boys as More Responsible than Girls</i> .....	101
- <i>Greater Number of Years Working with CSA clients &amp;         Victim Credibility</i> .....	102
<b>Research Contributions, Limitations &amp; Future Research .....</b>	<b>105</b>
<b>Concluding Remarks .....</b>	<b>112</b>
<b>REFERENCES .....</b>	<b>117</b>

## List of Appendices

	Page
A: Online Invitation Email & List of Internet Links .....	135
B: Online Consent Form .....	137
C: Paper Version of Consent Form.....	138
D: 12 Vignette Versions.....	140
E: Victim Responsibility & Credibility Survey.....	152
F: Online Response Confirmation Page: Complete Missing Questions .....	156
G: Online Response Confirmation Page: Proceed to Next Section .....	157
H: Open-ended Questions.....	158
I: Demographic Survey.....	159
J: Request Results Form.....	160
K: Correlation Matrices (testing for multicollinearity among predictor variables) .....	161

## List of Tables

	Page
1: Percentage of counsellors contacted by mail and email to participate in research.....	54
2: Percent of male and female counsellors in the sample and contacted to participate in the research .....	62
3: Return rate for all counsellors contacted to participate in the research (%).....	62
4: Survey returns by response method and counsellor gender (%).....	62
5: Percent of survey returns in sample by response method (N=149).....	63
6: Number of surveys and corresponding vignette versions returned by counsellors .....	63
7: Demographic distribution of sample: Continuous variables.....	65
8: Demographic distribution of sample: Categorical variables.....	66
9: Percent of counsellors who have experience working with CSA clients by specialization area (N=84).....	67
10: Descriptive statistics for the dependent variables (Victim responsibility and Victim Credibility .....	68
11: Percentage of counsellors' attributions of Victim Responsibility and Victim Credibility scores (N=149) .....	73
12: Counsellors' views of Victim Responsibility and Victim Credibility by Perpetrator- victim Relationship .....	74
13: Counsellors' views of Victim Responsibility and Victim Credibility by Victim Gender.....	75
14: Counsellors' views of Victim Responsibility and Victim Credibility by Perpetrator Gender.....	76
15: Counsellors' views of Victim Responsibility and Victim Credibility by Type of CSA.....	76
16: Counsellors views of Victim Responsibility and Victim Credibility by Counsellor Gender.....	77
17: Counsellors' views of Victim Responsibility and Victim Credibility by Years of Counselling Experience (%) .....	78

18: Counsellors' views of Victim Responsibility and Victim Credibility by Specialization (%).....	78
19: Counsellors' views of Victim Responsibility and Victim Credibility by Years of Experience Working with CSA Clients.....	79
20: Spearman's correlation ( $r_s$ ) and eta-squared ( $\eta^2$ ) coefficients describing associations between the independent and dependent variables.....	83
21: Independent and dependent variables in data set.....	85
22: Mahalanobis values for predictor variables to check for outliers.....	87
23: Logistic regression coefficients from the full model goodness-of-fit tests .....	89
24: Logistic regression coefficients for individual predictors (DV=victim responsibility) .....	93
25: Logistic regression coefficients for individual predictors (DV=victim credibility)....	93

## List of Graphs

	Page
1: Distribution of Counsellors' Victim Responsibility Scores .....	70
2: Distribution of Counsellors' Victim Credibility Scores .....	70
3: Scatterplot of the Relationship Between Counsellors' Victim Responsibility and Credibility Scores.....	73

## CHAPTER 1: INTRODUCTION

The occurrence of incest and child sexual abuse (CSA) in Canada and the United States has never been more widely publicized through media outlets and discussed by academics than it is today. It is fair to say that there is a growing awareness that children are vulnerable to sexual abuse by family members and adults that they interact with on a daily basis such as teachers. Counsellors play an important role in mitigating the effects of sexual abuse experienced in childhood and adulthood. Gender is of importance to counsellors' perceptions of victims because different gender combinations of perpetrator-victim pairings suggest different experiences of sexual abuse and relationships of power. The aim of this thesis is to explore how victim gender and perpetrator-victim relationships influence views of victim responsibility and credibility.

I begin this thesis with an examination of the different ways that psychiatric and medical professionals have understood and talked about CSA and its victims and contrast this to different feminist conceptualizations of CSA (chapter 2). The discussion begins with Freud, who observed that childhood incest contributed to psychological problems in adulthood, most notably hysteria. For Freud, incest produced a fractured mind. This was a very different understanding of sexual abuse compared to Kinsey's research during the 1940s and 1950s, which focused on the sexualization of CSA, with its victims as the initiators, seducers and benefactors of adult-child sexual relationships.

In contrast to Freud's and Kinsey's psychological interpretations of verbal disclosures of sexual abuse, in the late 1960s, Kempe approached physical and sexual abuse from a medical perspective and focused on assaults on children as physical trauma. As a pediatrician, his research on the examined effects of CSA included anatomical

evidence and use of x-rays to support the occurrence of physical and sexual assault. Beginning in the 1970s, in addition to viewing the personal injustice of physical trauma as evidence of incest, feminist voices were added to the discussion and all forms of sexual violence against women was viewed as evidence of larger social injustices, namely patriarchy. In these early feminist works, patriarchy was understood as a social structure supporting the oppression and dominance of women by men. Early feminists such as Florence Rush (1974, 1977, 1980), Louise Armstrong (1978), Judith Butler (1978) and Judith Lewis Herman (1981) argued that within a patriarchal structure men are privileged over women because of their sex. Such privilege was expressed in various forms of oppression ranging from the physical to the emotional, including sexual oppression through rape, harassment, incest and CSA. These feminist works included a focus on the oppression of children, particularly girls, through the occurrence of male-perpetrated incest and CSA (Brownmiller, 1975; Herman & Hirschmann, 1977; Butler, 1978; Hanmer, 1978; Armstrong, 1978, 1982; Brown, 1979; Rush, 1980; Herman, 1981; Russell, 1983, 1984, 1986; Carter, 1985; Faller, 1988; Glaser & Frosh, 1988; Kelly, 1988; Hanmer, Radford, & Stanko, 1989; Kelly & Radford, 1998).

The discussion of children as victims further explores more contemporary feminist works that problematize other factors, in addition to gender, that mediate abusive relationships in particular, race, class and age (Henry, 2004; Price, 2005; Zack, 2005). Similarly, other literature on masculinities (Heward, 1996; Edley & Wetherell, 1996; Plummer, 2005) and critical youth studies (Bell, 1995; Eder, 1997; Heilman, 1998) is explored to examine how these factors impact relationships of power that reach beyond earlier conceptualizations of patriarchal oppression between men and girls. This literature

sheds light on how it is possible, within a patriarchal society, for boys and girls to be oppressed by members of their same sex, and for boys to be sexually victimized by women. Moreover, some feminists including Mary DeYoung (1981) and Myriam Denov (2001) argue that oppressive interpretations of sexual abuse and its victims contribute to further victimization when children are viewed as responsible for their victimization and not believable in their disclosures of sexual abuse. Finally, brief consideration is given to more recent mainstream literature which somewhat overlooks restrictive definitions of CSA and counsellors' views of victims as oppressive.

In chapter 3, I examine the ways that girl and boy victims are portrayed in the primary psychological literature on CSA and incest. This literature elaborates on how gender impacts counsellors' perceptions of victim responsibility and credibility. I begin by exploring how girl CSA and incest victims are discussed in the psychological literature from the 1920s through the 1960s to the present. In the earlier literature from the 1920s to the 1960s, victim gender played a central role in how victimized children were talked about and portrayed. Girls sexually abused by men are described as "seductive" and even "participant victims" by counselling professionals, while boys are not. In this early literature, boys are portrayed as a "truer" kind of victim than are girls, when sexually abused by a man and when sexually abused by a woman, boys are sometimes not portrayed as victims at all.

Moving forward to the psychological literature of the 1980s, we find that the credibility of children's disclosures of CSA is now questioned by medicalizing victim behaviour as "syndromes". Summit's (1983) child sexual abuse accommodation syndrome (CSAAS) and false memory syndrome (FMS), which emerged from the False

Memory Syndrome Foundation established in 1992, are discussed as ways of discrediting girls' disclosures of abuse moreso than those of boys. Girls as victims of same-sex abuse are also briefly discussed and accounted for by the intersectional feminist literature on factors that mediate such relationships to help explain how they can occur within a patriarchal context (Crowder, 1993; Denov, 2004).

The latter part of chapter 3 shifts attention to boys as victims and uses literature on masculinities and intersectional feminist works to explore the contradiction between patriarchal ideologies of masculine power and the reality of boys as sexual victims of both men and women (Crowder, 1993; Mathews, 1995; Heward, 1996; Edley & Wetherell, 1996; Plummer, 2005). Here I argue that, although boy victims of female perpetrators are talked about in the literature as "seekers" of sexual opportunities with women rather than victims of them, patriarchal explanations cannot account for why women oppress boys. Nor can they address relationships of power along gender lines when boys are abused by members of their own sex. Thus, patriarchy is examined as multi-faceted by identifying how same-sex CSA victims and boys sexually abused by women are interpreted by critical youth studies and the intersectional feminist literature which identify other relations of power (aside from those based on sex) such as age, that can extend our understanding of sexual oppression beyond patriarchy. Lacking from this psychological literature, however, is a discussion of whether different gender pairings of different perpetrator-victim relationships influence counsellors' views of CSA victims as responsible for their victimization and not credible in their disclosures of sexual abuse.

In chapter 4, I discuss my research methodology. I begin by defining the difference between "methodology" and "methods" and discuss how these concepts can be

combined to build research that reflects a feminist scholarship. As such, I argue that this thesis reflects feminist research and uses both quantitative and qualitative methods. Although feminist methodologies typically include qualitative methods, works by Chafetz (1988) and Risman (1993) are used to argue that quantitative research methods do not detract from feminist scholarship, nor do qualitative methods alone define research as feminist. Additionally, I respond to feminist critiques of quantitative methods by discussing the advantages of using such an approach, and particularly why mixed methods are most appropriate for my research examining counsellors' views of CSA victims. I conclude the chapter with a description of how I conducted my research and the tools used to do so, including; participant recruitment methods, administration of participation packages, and the quantitative and qualitative measures used to collect and analyze data on counsellors' views of CSA victims.

In chapter 5, I discuss the results of the statistical tests used to interpret the quantitative data on counsellors' views. I begin by using descriptive statistics to discuss the survey return rate, demographic distribution of the sample and features of the dependent and independent variables. A descriptive analysis of the data suggests associations between certain independent and dependent variables. Next, a correlation analysis (Spearman's correlation) and measure of variability (Eta-squared) are used to examine this possibility further. Finally, a logistic regression analysis is used to assess the predictability of the independent variables individually (Wald statistic) and as a group (Model Goodness-of-fit Test) to explore whether the relationships raised by the correlation tests exist in the larger population of counsellors from which the sample was drawn.

In chapter 6, I engage in a discussion of my findings by “making sense” of the qualitative data beginning with a discussion of counsellors’ comments on victim responsibility and credibility. Here, masculinities literature, critical youth studies and intersectional feminist literature are used to interpret counsellors’ views of girl and boy victims. For example, critical youth work by John Bell (1995) is useful in describing how CSA is an example of “adultism”, which he defines as the systematic mistreatment and disrespect of young people. Next, I examine the implications of the statistically significant findings of my research in relation to existing research on perceptions of CSA victims, as well as the theoretical significance of these findings in relation to new ways of thinking about patriarchy and CSA. Also, the theoretical and methodological contributions of my research are discussed, followed by an examination of the research limitations and suggested directions for future research. My closing remarks consist of a summary of my research and a short discussion about why I chose this area to research, and how it has broadened my perspective and added to my knowledge about counsellors’ views of CSA and its victims, as well as various ways of conducting social research.

CHAPTER 2:  
PUTTING VIEWS OF CSA AND ITS VICTIMS INTO CONTEXT:  
ORIGINS OF THE CONCEPT

**Freud: Incest Produces a Fractured Mind**

Freud is often described as the father of psychoanalysis. Although his research on psychosexual development, the unconscious mind, neuroses, and repressed memories were heavily disputed in their time, much of the current foundations of psycho-analytic theory are based on Freud's works. Freud argued that sexual experiences in childhood had very little effect at the time of occurrence but that memories of such experiences were repressed into the unconscious. Later in adulthood, repressed childhood memories were triggered by a sexual experience or other stimuli and were expressed as psychological trauma. Freud's traumatic memory theory was controversial when it first appeared in *Aetiology of Hysteria* (1896), and still proves controversial today to those who question why he eventually revised his theory on traumatic memories. This view was controversial because it conflicted with the prevailing scientific literature of the time, which argued that mental illness was a result of poor genes, not environmental causes (Masson, 1984: 136-137). The most noted psychological disorder that Freud wrote about was hysteria, which he observed in many of his female clients who disclosed a history of childhood incest perpetrated most frequently by their fathers. It is worth noting that many of Freud's female clients belonged to "high-class" society, which meant that their disclosures of incestuous experiences reflected very poorly on powerful men in society. Freud accumulated many incest accounts from women, and although he did not acknowledge the traumatic effects of incest for children, his reaction to his clients' accounts illustrates his awareness that children were being sexually misused:

The idea of these infantile sexual scenes is very repellent... the feeling of a sexually normal human being recoils from the idea of these infantile sexual scenes, containing, as they do, all the abuses known to libertines and impotent persons, whose sexual practices include the improper use of the mouth and the rectum (Freud, 1896: 211).

When met with professional criticism about the validity of his clients' recollections of childhood incest, Freud provided several arguments supporting the truthfulness of his clients' memories, including clients' distress upon recalling the events, disbelief of their own memories, and the uniformity of detail among different clients' stories (Kimball, 1999: 57). Despite Freud's apparent perception of incest as a misuse of children, and his commitment to defending his clients' credibility, Freud eventually retracted his traumatic memory theory:

It happened by chance that my earlier, not very plentiful material contained a disproportionately large number of cases in whose infantile history of seduction by adults or other children had played the chief part. I overestimated the frequency of these occurrences, which are otherwise quite authentic, and all the more so since I was not at this period able to discriminate between the deceptive memories of hysterics concerning their childhood and the memory-traces of actual happenings. I have since learned to unravel many a phantasy of seduction and found it to be an attempt at defence against the memory of sexual activities practised by the child himself (masturbation of children)... hysterical symptoms... no longer appeared as direct derivations of repressed memories of sexual experiences in childhood; but, on the contrary, it appeared that between the symptoms and the infantile impression were interpolated the patient's phantasies (memory-romances), created mostly during the years of adolescence and relating on one side to the infantile memories on which they were founded, and on the other side to the symptoms into which they were directly transformed (Freud, 1906: 276-277).

Reasons provided by Freud himself as to why he revised his traumatic memory theory are identified in letters he wrote to a colleague, Wilhelm Fliess, prior to the publication of the 1906 paper. These reasons include: (i) his lack of success in psychoanalyses, (ii) his surprise at the frequency of father-daughter incest disclosures, (iii) arguments that in the unconscious it is impossible to distinguish between truth and fiction, and (iv) that sometimes repressed memories are never realized in the conscious mind (Freud, 1890-1902: 227-246). By 1914, Freud published another paper describing

how his clients' lingering desires for a sexual relationship with their fathers led to the development of hysteria. And herein lies the contemporary controversy: why did Freud—upon learning of the frequency with which father-daughter incest occurred and its psychological effects in adulthood—fail to draw attention to the injustice inflicted upon countless girls by their fathers?

Feminists continue to be the strongest challengers of Freud's retraction of his traumatic memory theory (Rush, 1977, 1980; Herman, 1981; Enns, McNeilly & Gilbert, 1995; Pope & Brown, 1996; Waites, 1997; Kimball, 1999). These feminist authors take issue with Freud's self-stated reasons for the retraction of his traumatic memory theory because he failed to explore why father-daughter incest was so frequently reported by his clients, to question whether traumatic effects existed in childhood, and to view male perpetrators as accountable. Furthermore, these critics argue that Freud's retraction contributed to the preservation of patriarchal notions of male power and privilege by discrediting female clients who sought his professional help. One could argue that in so doing, Freud sacrificed and further victimized the women he had counselled by not believing their accounts of incest, and laid a foundation for other professionals to do the same. It was particularly through his retractions and omissions that he contributed to a professional victimization of girls and women whose disclosures of incest would be considered fictional.

In essence, Freud's theoretical influence on the discourse surrounding incest accomplished two things: first, *Three Essays on the Theory of Sexuality* (1905), portrayed children as driven by unconscious sexual urges leading them to desire incest with their parent of the opposite sex. Furthermore, in *Two Lies Told by Children* (1913), Freud

describes a girl's "excessive fondness" for her father as "hidden incestuous love" (p. 306), which had a specific impact on girls abused by their fathers. Second, repressed traumatic memories of childhood incest remembered in adulthood were reframed as fantasy.

Freud's notions of child sexuality and fantasies in the early 1900s, presented an image of children as sexual beings that was in stark contrast with the highly conservative Victorian era beliefs of children during the mid- to late-1800s. Nevertheless, prevailing attitudes of child incest victims among clinicians and mental health professionals adopted Freud's sexuality-focused framework to describe children's involvement in incest.

### **Kinsey: The Sexualization of Incest, CSA and its Victims**

Kinsey's survey research on male and female sexuality during the 1940s and 1950s further illustrates a minimization and denial of the abusiveness of CSA by mental health professionals. The frequency with which Kinsey's adult male research participants disclosed incidents of and ongoing sexual relationships with children was not recognized by Kinsey as abusive despite his findings that suggest otherwise. In Kinsey's *Sexual Behaviour in the Human Male* (1948), descriptions such as the children's "screams", their "extreme trembling" their "violent cries", and willingness to "fight away from the partner [adult perpetrator]" are judged by Kinsey as reflecting "definite pleasure from the situation" (pp. 160-161). In Kinsey's (1953) subsequent research, titled *Sexual Behaviour in the Human Female*, he portrayed social and cultural *prohibitions* against adult-child sexual encounters as more damaging to children than the experience of sexual abuse itself:

It is difficult to understand why a child, except for its cultural conditioning, should be disturbed at having its genitalia touched, or disturbed at seeing the genitalia of other persons, or disturbed at even more specific sexual contacts. When children are constantly warned by parents and teachers against contact with adults, and when they receive no explanation of the exact nature of the forbidden contacts, they are ready to become hysterical as soon as any older person approaches, or stops and speaks to them in the street, or fondles them, or proposes to do something for them, even though the adult may have had no sexual objective in mind. Some of the more experienced students of juvenile problems have come to believe that the emotional reactions of the parents, police officers, and other adults who discover that the child has had such a contact, may disturb the child more seriously than the sexual contacts themselves (p.121).

A Freudian influence is reflected in Kinsey's research in several ways. First, Kinsey's declarations that fondling could occur without any sexual objective in mind limits the interpretation of sexual abuse to behaviour driven by sexuality and it excludes power and domination as motives for engaging in fondling, or any other form of sexually abusive behaviour. Second, Kinsey's vague category of adult asexually motivated behaviours toward children viewed as "to do *something* for them" implies a catch-all category of sexual behaviour that could be accepted as non-abusive. Similarly, Kinsey uses the non-specific term of "sexual contacts" to refer to a wide range of sexually abusive behaviours and thereby avoids any specific reference to sexual abuse and incest as abusive, criminal, damaging or humiliating. Finally, arguing that parents' emotional reaction is more detrimental to children than "sexual contacts" implies that the parents do not already know about their child's victimization and, therefore, are not the ones sexually abusing their children. Such an implication perpetuates the falsehood that children are more likely to be victimized by strangers than by parents (namely fathers) and relatives in their own homes.

The underlying Freudian influence observed in Kinsey's unwillingness to report on the frequency of adult-child sexual abuse is reflected in the subdued language used to minimize the abusiveness of CSA. The abusiveness of CSA is subverted by not viewing

male perpetrators as accountable and by ignoring potential detrimental physical, emotional, and psychological effects of sexual abuse on children. As such, similar to Freud, Kinsey's research on human sexuality provided *evidence* to raise questions about the sexual exploitation of children but actually failed to raise these questions. This trend began to change with a shift in emphasis toward the physical evidence of CSA.

### **Kempe: Sexual Trauma Produces a Fractured Body**

As a pediatrician, Charles Henry Kempe was among the first to recognize the harmful effects imprinted on physically and sexually abused children from a medical perspective. Using x-rays to reveal broken bones and other physical trauma related to physical assault, in 1961 Kempe coined the term "battered child syndrome" and with it brought an entirely new understanding of non-accidental injuries suffered by children (Kempe, Silverman, Steele, Droegemuller & Silver, 1962). In 1977, he established the international journal of *Child Abuse and Neglect*, which informed other professionals and academics about the incidence and prevalence of physical and sexual abuse committed against children on an international level. In his later research, Kempe (1980) associated the occurrence of violent molestation and child rape with physical evidence of sexual trauma and insisted that children's disclosures of sexual abuse were reliable evidence for the occurrence of sexual abuse:

Frequently, vaginal tears and/or sperm evidence or a type-specific gonococcal infection can be the ultimate proof...Orogenital molestation may leave no evidence, except the child's story. This is to be believed! Children do not fabricate stories of detailed sexual activities unless they have witnessed them. They have, indeed, been eyewitnesses to their abuse (p. 204).

Although Kempe considered children's disclosures of sexual abuse to be believable, he recognized that Freudian influences still lingered: "some doctors, including

many psychiatrists, routinely ascribe specific complaints of incest, and even incestuous pregnancy, to adolescent fantasy” (Kempe, 1980: 199).

More current pediatric focus on the physical trauma suffered as a result of sexual assault includes the transmission of sexually transmitted diseases (STDs) to child victims (Jaffe, 1976; Seidel, Jonana & Totten, 1979; White, Loda, Ingram, & Pearson, 1983; Gardner & Jones, 1984; Gutman, 1990; Emans, 1992). This literature discusses the presence of STDs in children as strong evidence supporting the occurrence of CSA and highlights the continued medical problems resulting from such diseases that some children will have to treat throughout their life. Kempe’s work and devotion to the study of CSA led to the recognition that it was harmful to children on a physical level, something quite different from much of the psychological literature preceding it which had not recognized any detrimental effects of CSA as manifesting during childhood. However, it was feminist works emerging within the same time period as Kempe that brought a conceptual understanding of CSA to a level where it was viewed as indicative of larger social problems related to patriarchy.

### **Feminist Critique: Incest and CSA Reflect Larger Social Struggles**

Early feminist perspectives on CSA brought a gendered outlook to all forms of sexual violence perpetrated by men against women and girls. These works conceptualized patriarchy (a system of male oppression) and misogyny (the hatred of women) (Herman & Hirschman, 1977; Rush, 1977, 1980; Herman, 1981; Butler, 1978; Russell, 1986). Such views of patriarchy pointed to the complexities of power relations between men as a group who dominate, oppress and exploit women as a group within society (Walby,

1990). Frye (1983), for example, describes oppression as a deliberate attempt by those in power to control those without power:

The experience of oppressed people is that the living of one's life is confined and shaped by forces and barriers which are not accidental or occasional and hence avoidable, but are systematically related to each other in such a way as to catch one between and among them and restrict or penalize motion in any direction. It is the experience of being caged in: all avenues, in every direction, are blocked or booby trapped (p. 8).

Weisheit and Mahan (1988) argue that men and women are not afforded the same privileges in society because they are socialized to accept different gender roles in society and the family:

Females are socialized to accept a subordinate position in the family and society and to accept sexual objectification. Males are socialized to be dominant in the family and society and to sexually objectify women. The central hypothesis is that the power dynamics within a patriarchal social system perpetuate and condone crime such as incest and child sexual abuse by creating a belief that men are entitled to gain sexual gratification from women. The father who dominates his daughter for sexual gratification can then be seen to be preparing his daughter for the subservient role she will fulfill in society and in her marriage (pp. 93-94).

In particular, some works refer to the family as a subsystem of social patriarchy that refers to male control in domestic settings where sexual privilege and ownership give licence to husbands and fathers to sexually exploit women and children (Barrett, 1980; Ursel, 1986; Dimen, 1987; Lipman-Blumen, 1984). Three arguments here support an interpretation of incest and CSA as evidence of male sexual oppression over girls. Firstly, incest is perpetrated most often, but not exclusively, by fathers against daughters (Herman & Hirschman, 1977; Butler, 1978; Rush, 1980; Herman, 1981; Armstrong, 1982; Russell, 1983, 1984, 1986; Kelly, 1988). Blume (1990) even describes father-daughter incest as an "unrecognized epidemic". Secondly, some very early works argued that some forms of incest are more forbidden than others because incest barriers are stronger against mother-son incest compared to father-daughter incest (Barry & Johnson, 1958; Raphling, Carpenter & Davis, 1967; Henderson, 1972). Stronger social taboos

against mother-son incest suggests that boys are not sexually exploitable in the same ways that girls are, and that men have different power as perpetrators compared to women. Herman (1981) describes this power as male sexual entitlement within the context of father-daughter incest:

Implicitly the incestuous father assumes that it is his prerogative to be waited upon at home, and that if his wife fails to provide satisfaction, he is entitled to use his daughters as a substitute. It is this attitude of entitlement—to love, to service, and to sex—that finally characterizes the incestuous father and his apologists. In a patriarchal society, the concept of the father's right to use female members of his family—especially his daughters—as he sees fit is implicit in the structure of the incest taboo (p. 49).

Finally, the sexual exploitability of girls through incest is seen as maintained by the patriarchal ideology of ownership. Herman and Hirschmann (1977), for example, argued that patriarchal social norms of masculinity and femininity address why father-daughter incest is more acceptable than other incestuous relationships:

A patriarchal society, then, most abhors the idea of incest between mother and son, because this is an affront to the father's prerogatives. Though incest between father and daughter is also forbidden, the prohibition carries considerably less weight and is, therefore, more frequently violated. We believe this understanding of the asymmetrical nature of the incest taboo under patriarchy offers an explanation for the observed difference in the occurrence of mother-son and father-daughter incest (p. 741).

This literature suggests that a family context provides men with an additional level of entitlement whereby they are not only perceived as “entitled” to exploit girls’ sexuality by virtue of their masculinity, but also because of their position as “father”.

Nelson and Oliver (1998) point to a major weakness in the “patriarchy-as-power” thesis in that, it does not explain the occurrence of boy victims or female perpetrators, including this particular adult-child combination both inside and outside of the family context. Hence, this more recent feminist literature is useful in expanding our understanding of CSA and incest beyond power struggles based on sex. These works address the different ways in which other mediating factors such as age, race and class

complicate relationships of power both between and within gender groups. Hanmer, Radford and Stanko (1989) and Crenshaw (1989) argue that women and girls are sometimes targeted for sexual violence by men precisely because of their race. Similarly, Radford (1992) and Kelly (1988) argue that for black women, misogyny and racism are often intertwined in male expressions of sexual violence. In contrast, MacKinnon (1996) argues that “skin privilege... has never insulated white women from the brutality and misogyny of men, mostly but not exclusively white men, or from its effective legislation” (p. 52). Others describe how race empowers some women over members of their *own* gender, as Crenshaw (1989) argues: “white feminists often ignore how their own race functions to mitigate some aspects of sexism and, moreover, how it often privileges them over and contributes to the domination of other women” (p. 154). Such intersectional feminist literature identifies the complexity of how women can be simultaneously privileged and oppressed within a patriarchal society (Hanmer, Radford & Stanko, 1989). By exploring how other factors such as race complicate relations of power, the intersectional feminist literature allows for the possibility that girls can be oppressed by members of their own gender. Furthermore, by problematizing age as a factor that empowers adults (women) over children (boys), it is also possible for the perpetrator-victim gender roles to be reversed such that boys will be sexually victimized by women.

This gender-role reversal of female perpetrators and male victims also raises a challenge regarding definitions of sexual abuse. Some works view boys as “seekers” of sexual encounters with women and are expected to enjoy such sexual encounters as sexual “opportunities” rather than as incidents of victimization (Walby, 1990; Nelson & Oliver, 1998; Banyard, Williams & Siegel, 2004). Banyard, Williams and Siegel (2004)

argue that patriarchal expectations for men (including boys) to seize sexual opportunities with women redefine their sexual exploitation by women as not abusive:

Male survivors may be less likely to label these experiences as abuse and may feel compelled to see such experiences as normal socialization, which stereotypically equates the male gender role with the seeking early of sexual experiences with women. This absence of stigma may mitigate the consequences for some men because they perceive the experiences to be deemed “normal” by society (p. 225).

Indeed, some research finds that sometimes boys do not recognize such sexual encounters as abusive (Finkelhor, 1984, 1990; Fischer, 1991). Recognizing boys as victims of female-perpetrated CSA, even when they are sometimes viewed as empowered because of patriarchal notions of masculinity, still contradicts fundamental patriarchal assumptions about sexual violence in terms of assumptions about male domination and female subordination. In this regard, the literature on masculinities is useful in addressing “boys as victims” by problematizing other factors relevant to power relationships both between boys and women, and boys and men. Heward (1996), for instance, talks about gender as being “multi-layered” and incorporates hierarchies of age as mediating power struggles between boys and women and men. This suggests that, beyond patriarchal understandings of masculinity, understanding boys as CSA victims requires a broader understanding of oppression, one that can make sense of its occurrence. In other words, although the sexual abuse of boys is not new, the conceptual and theoretical ways of making sense of boys as victims are new in relation to initial feminist frameworks for understanding sexual violence as oppression predicated upon power struggles between the sexes.

Given the richness of the different feminist perspectives on relations of power that impact views of sexual violence, feminists in general are credited with broadening definitions of incest and CSA in ways that differ from mainstream definitions. For

instance, the Canadian legal definition of incest found in section 155(1) of the Criminal Code, refers to incest as sexual intercourse between biologically related family members. In contrast, feminist authors, such as Dominelli (1986) and Kelly (1988) interpret incest more broadly to include people who are related by marriage ties as well as by blood no matter how distant the relationship. Blume (1990) defines incest by the sexually abusive acts committed, and does not limit incest to the occurrence of sexual intercourse:

Must incest involve intercourse? Must incest be overtly genital? Must it involve touch at all? The answer is no... Incest is not necessarily intercourse. In fact, it does not have to involve touch. There are many other ways that the child's space or senses can be sexually violated. Incest can occur through words, sounds, or even exposure of the child to sights or acts that are sexual but do not involve her (p. 4-5).

Other feminists point out that sexual abuse is experienced differently by each child and argue that the crucial factor determining whether an act is incestuous is the child's physical and emotional experience, including his/her level of discomfort signalled by uneasiness or embarrassment where violations of trust may be the action that is most abusive (Bass & Davis, 1988; Engel, 1989).

These contributions of feminist works to definitions of incest and CSA and the recognition of differential experiences of sexual abuse mean that definitions of sexual abuse now cover a spectrum of different verbal (i.e. harassment), emotional (i.e. violations of trust) visual (i.e. pornography, flashing) and physical acts (i.e. petting, rape).

Moreover, DeYoung (1981) and Denov (2001) argue that mental health professionals can potentially contribute to their clients' feelings of victimization when disclosures of CSA are not believed and when clients are viewed as responsible for their victimization. Some suggest that such views on the part of mental health professionals reflect and maintain patriarchal ideologies, and have a negative impact on counselling efficacy and outcomes (Parisien & Long, 1994; Campbell & Carlson, 1995; Enns, 2000).

### **Mainstream Research on CSA: Feminist Friendly?**

The Committee on Sexual Offences Committed Against Children and Youth, better known as the Badgley Report (1984), was the first nationally funded research project to provide statistics on the incidence and prevalence of sexual offences against children and youth in Canada. The Report's National Population Survey asked 2,008 Canadian CSA survivors aged 18 years and older about sexual abuse experienced when they were 21 years old and younger (p.15). Based on this survey, the Badgley Report (1984) estimated that the proportion of sexual assaults committed against children younger than 16 years old were three in four for girls, and one in four for boys (p. 198). Two other surveys used by the Badgley Report (1984) on sexual offences committed against children and youth in Canada (the National Hospital Survey and the National Child Protection Survey) reported that the most common type of association between perpetrators and victims was familial, whereby children were more likely to be sexually abused by parents or relatives than by strangers (p. 218).

Based on such findings, the Badgley Report (1984) recommended improved legislation for the protection of children and youth from sexual abuse and exploitation, for police officers, academic researchers, child protection services, and for medical and hospital personnel (pp. 43-90). However, the Badgley Report (1984) did not make any recommendations specifically for counselling professionals. One might assume from this Report that there was no need to improve upon counselling procedures, techniques or training for CSA counsellors. However, research since then has suggested that more education and specific training in specialty CSA areas are required in order to support optimal counselling goals and outcomes (Parisien & Long, 1994; Campbell & Carlson,

1995; Enns, 2000). In 1991, a preliminary report produced by the Task Force on Sexual Abuse commissioned by the Physicians and Surgeons of Ontario recommended that postgraduate courses in psychiatry across Canada should address specific sexual abuse issues such as power, trust and boundary issues in practice, women's issues, and gender-based treatment and program management (p. 62). Research by Adams and Betz (1993) argues that there are important gender differences between men and women counsellors' attitudes towards CSA and its victims:

Female counsellors had significantly broader definitions of incest than did male counsellors and were less likely, in comparison with male counsellors, to perceive incest claims as fantasy or imagination rather than reality... Those counsellors with more liberal (profeminist) attitudes toward gender roles reported more supportive attitudes toward incest survivors, in that they were less likely to blame victims for the incest, saw the effects of incest as more serious, had a broader definition of incest, were more likely to believe the victim's claims of incest and attributed less responsibility to the child (p. 213-214).

Johnson (1996) argues that restrictive definitions of CSA and incest are tied to male interpretations of sexual violence:

A result of the unequal status of women is that men occupying powerful positions in the legal, medical, and educational, and religious systems have had the authority to define what acts of violence against women [and girls] would be considered injurious and what actions would be undertaken by these institutions in response (p. 22).

Counsellors have the power not only to produce information about CSA and victimhood as fact but also to shape children's understanding of their own victimization. Counsellors are a source of support for CSA and incest victims who can provide beneficial treatment. Numerous victim support organizations and academic sources list endless benefits of providing CSA victims with counselling, including: (i) working through the painful details of the abuse making it easier to handle and less frightening; (ii) understanding the complex emotions experienced during and after the sexual abuse occurs; (iii) understanding that there is a difference between sexual abuse and normal,

healthy sexuality; (iv) understanding why sexual abuse happened and that children are not to blame, and finally (v) how addressing these issues through childhood counselling can help prevent the cycle of abuse from continuing into adulthood (Miller, 1986; Saxe, 1993; Broatch & Raynaught, 1993, 1993a, 1994). On the other hand, because of this power, counsellors, like other professional groups (including police officers and judges) can potentially add to children's feelings of victimization by viewing them as responsible for, and not believable in, their disclosures of CSA (Everson, Boat, Bourg & Robertson, 1996; Baines & Alder, 1996; Belknap, Holsinger & Dunn, 1997; Bond-Maupin, Maupin & Leisenring, 2002; Gaarder, Rodriguez & Zatz, 2004).

### **Summary**

Historical overviews of the different ways CSA and incest are interpreted suggest that perceptions of victims and perpetrator-victim relationships are important in defining adult-child sexual encounters as abusive. The literature suggests that traditionally, mental health professionals' views are associated with mainstream definitions of CSA and incest. Early feminist works viewed such definitions as restrictive and sometimes oppressive particularly when victims are viewed as responsible or not believable in their disclosures of sexual abuse. Furthermore, these works lead to questions about whether girls will be viewed as more or less sexually accessible based on their relationship to their abusers and whether boys will be viewed as responsible for CSA. The next chapter examines the ways that girl and boy victims are portrayed in the primary psychological literature on CSA and incest.

### CHAPTER 3: BLAMING BABES: COUNSELLORS' VIEWS OF CSA VICTIMS

Victim gender is now a widely discussed and important aspect of CSA and we still see a Freudian and Kinseyian influence in this discourse. The literature clearly documents characteristic differences in sexual abuse experienced by girls and boys, including age of abuse onset, prevalence, incidence, severity, and duration (Finkelhor, 1979, 1984; Pierce & Pierce, 1985; Bagley & Thomlison, 1991; Kendall-Tackett & Simon, 1992; Black & DeBlassie, 1993). Some literature also suggests that counsellors view girl and boy victims differently (Abraham, 1927; Bender & Blau, 1937; Bender & Grugett, 1952; Rogers & Weiss, 1953; Maisch, 1972; Schultz, 1973; Gladstone, 1978; Gordon, 1988; Adams & Betz, 1993; Larson, 1993; Everson, Boat, Bourg & Robertson, 1996; Baines & Adler, 1996; Belknap, Holsinger & Dunn, 1997).

In this literature, the following are three ways that counsellors and researchers describe girl, but not boy, victims: (i) as seductive, (ii) as participant victims, and (iii) as liars. While these categories overlap somewhat in chronological time, a progression is observed from the construction of girl victims as seductive in the 1920s and 1930s to not believable in their disclosures of incest and CSA in the 1980s and 1990s. Meanwhile, boy victims are portrayed very differently compared to girls. The literature suggests that boys are viewed as credible in their disclosures of sexual abuse (Spencer & Dunklee, 1986) and are sometimes not viewed as victimized when sexually abused by women (Finkelhor, 1984, 1990; Fischer, 1991; McFarlane & van der Kolk, 1996). Interestingly, there is no research on whether different familial relationships between perpetrators and victims (such as biological parents and step-parents) influence counsellors' views of girls and

boys differently. Furthermore, there is also a lack of research on whether victims of non-familial perpetrator-victim relationships (such as teacher-student) are viewed differently than familial CSA victims. Nonetheless, several bodies of work contain information that is relevant in raising questions related to whether family structure has something to do with how counsellors view CSA victims.

## **Girls as Victims**

### Seductive Girls: 1920s to 1960s

In the presence of a man, she had a truly seductive manner; with nurses and the woman physician, she played the role of a baby, but with the male physician, she smiled, cuddled up to him, and tried to win evidence of affection (Bender & Blau, 1937: 501).

– Case report comment about a 5-year-old girl incest victim.

Much of the early psychological literature on mental health professionals' views of incest victims included descriptions of girls as seductive; a characterization supported by the belief that children's behaviour was driven by their unconscious desires to satisfy sexual urges (Abraham, 1927; Bender & Blau, 1937; Sloane & Karpinski, 1942; Bender & Gruett, 1952; Kauffman, Peck & Tagiuri, 1954; Gordon, 1955; Howard, 1959; Cormier, Kennedy & Sangowicz, 1962; Lustig, Dresser, Spellman & Murray, 1966; Machota, Pittman & Flomenhaft, 1967; Schultz, 1973). For example, Abraham (1927) argued that children had a "predisposition to sexual trauma" and that by virtue of their unconscious desires for sexual activity and inherent seductiveness, they become "willing partners" and responsible for provoking incestuous relationships with men (p. 666). Freud's (1905) psychosexual stages of development during childhood were adopted by mental health professionals as evidence supporting the argument that children have

unconscious sexual urges and needs. However, only for girls are such unconscious sexual urges constructed as giving rise to their inherent seductiveness in relation to child-initiated incest. Bender and Blau (1937) argued in their study of 16 case reports of CSA that children played an active role in provoking a sexual relationship with adults:

The few studies that have been made of this subject [incest] have contended to consider it an example of adult sex perversion from which innocent children must be protected by proper legal measures. Although this attitude may be correct in some cases, certain features in our material would indicate that children may not resist and often play an active or even initiating role (p. 513).

Research supporting the view that children initiate incestuous relationships with adults is, however, conflicting in its use of Freudian theory. Much of the literature that describes girls as seductive, also reports the age of girls as fitting within Freud's latency stage of psychosexual development. As described by Freud (1905), the latency stage is characterized by children's sexual repression, whereby sexual urges are not indulged in by children from about age six until puberty. Yet, an overwhelming majority of father-daughter incest research features children within this age range who were blamed for provoking incestuous relationships (Abraham, 1927; Bender & Blau, 1937; Sloane & Karpinski, 1942; Bender & Grugett, 1952; Kauffman, Peck & Tagiuri, 1954; Gordon, 1955; Howard, 1959; Cormier, Kennedy & Sangowicz, 1962; Lustig, Dresser, Spellman & Murray, 1966; Machota, Pittman & Flomenhaft, 1967). This inconsistency was addressed by Bender and Blau (1937) who argued that "Freud recognized that complete latency was only a theoretical extreme, and he agreed that sexual activity might occasionally reappear or remain throughout the whole duration of the latency period" (p. 514). Given that some early clinicians, such as Bender and Blau (1937), argued that complete latency was a theoretical extreme, Freud's theory of child psychosexual development was interpreted in such a way as to support clinicians' views of children as

seductive. Bender and Blau (1937) further advocated the idea of seductive children through their characterization of all 16 children in their research as having “unusually attractive and charming personalities”, when in actuality the authors depicted girl and boy victims differently (p. 511). Most girl victims in their case studies were described as having the following characteristics: desiring adult attention, experiencing “sex tension” and having an affectionate and friendly personality; whereas most boy victims were not portrayed as exhibiting such seductive-friendly attributes (p. 501-510).

Characterizations of children as seductive also seemed to differ in relation to perpetrator-victim relationships. Bender and Blau (1937) described almost exclusively child victims of non-familial sexual abuse as amiable, unusually attractive and possessing charming personalities. Interestingly, twelve out of the sixteen CSA cases examined consisted of non-familial sexual abuse argued to have been elicited by seductive victims, while only one out of the four familial incest cases portrayed the victim as having a seductive way about her. Later research by Bender and Grugett (1952) supported earlier conclusions that children with seductive-friendly personalities provoked sexual relationships with adults:

The original psychiatric evaluations repeatedly remarked on the children’s unusually attractive and charming personalities, and it was frequently considered that these qualities had contributed to their appeal as sexual objects. In many it was highly probable that the child had used his charm in the role of the seducer rather than that he had been the innocent one who had been seduced (p. 826).

Other early psychological literature did not view different incestuous relationships as leading to differences in the experience and perception of victims. Kaufman, Peck and Tagiuri (1954) treated incest between daughters and grandfathers, fathers, stepfathers, foster fathers, and brothers as the same and generally referred to any male figure as “father”. The merging of these different perpetrators into one amalgam “father” reflects a

lack of awareness that different perpetrator-victim relationships might also influence different attributions of blame towards victims. Equally important is that it obscures different features of incest itself, including the duration of incest over time, types of abusive acts perpetrated, short- and long-term effects of incest, and different behavioural reactions among victims. As shown in more recent literature discussing the incidence and prevalence of CSA, there are differences between CSA perpetrated by biological parents and non-biological parents. Finkelhor's (1984) findings suggest that stepchildren are most vulnerable to sexual abuse:

Children in stepparent families (especially *stepfather* families) showed a higher rate of sexual victimization. In these families a child was about twice as likely to have been sexually victimized (17 percent versus 8 percent for families without a stepparent) according to parents (p. 78).

Russell's (1986) research on female incest victims corroborates Finkelhor's (1984) findings when she reports that girls are at a greater risk of being sexually abused by stepfathers compared to biological fathers:

One out of every 43 women who had a biological father as a principal figure in her childhood years was sexually abused by him before the age of fourteen. This analysis reveals that women who were raised by a stepfather were over seven times more likely to be sexually abused by him than women who were raised by a biological father (p. 234).

In addition to the higher prevalence rates of sexual abuse perpetrated by stepfathers, Russell's (1986) findings further suggest that stepfathers abuse their stepdaughters more frequently, over a longer period of time, and tend to engage in more severe sexual acts compared to sexual abuse perpetrated by biological fathers (pp. 234-240). Other research, however, suggests opposing findings whereby there is little difference between sexual abuse perpetrated by biological fathers versus stepfathers (Groff & Hubble, 1984; Eisenberg, Owens & Dewey, 1987), and that biological fathers are the perpetrators of more severe sexual abuse (Phelan, 1986).

This early psychological literature presents girls not related to their perpetrators as seductive, resulting in the implication that such children are responsible for their victimization compared to boys and children biologically related to their perpetrators. Later research perpetuates this theme as victim gender and perpetrator-victim relationship continue to influence discourse about children's responsibility for their own victimization.

#### Participant Victims: 1950s to 1990s

While there was a consistent sexualization of girls in the early literature where they were described as seductive, there were also contradictory findings regarding whether children were considered responsible based on their relationship to perpetrators. In Rogers and Weiss' (1953) research on seventy-three girl incest and CSA victims, the authors measured victim responsibility and degree of abusiveness based on the number of perpetrators and the number of incidents of sexual abuse victims experienced. Rogers and Weiss (1953) were the first to refer to girl incest victims as "participant victims". These girls were described as girls who initiated and maintained sexual relationships with men; were very attractive and appealing; enjoyed sexual acts; and knew the men with whom they initiated sex, (who were often relatives or family friends) (pp. 1-4). In comparison, Rogers and Weiss (1953) characterized "accidental victims" as shy girls who had only one sexually abusive encounter, usually with a stranger (pp. 2-3). In contrast with earlier research that described victims as seductive when not biologically related to their perpetrators (Bender & Blau, 1937; Bender & Grugett, 1952), part of the criteria of Rogers and Weiss' (1953) definition of participant victims included girls who were

biologically related to their perpetrators. Such conflicting research supports earlier suggestions that girls are perceived as responsible for their victimization no matter who their perpetrators are, except for when perpetrators are strangers.

The construction of girl victims as participatory has important implications for how girls are conceptualized with regard to responsibility for sexual abuse. The language of “participant victim” suggests a certain voluntary willingness and lack of resistance towards sexual abuse, both of which imply consent on behalf of the child and, therefore, no perpetration of abuse. DeYoung (1981) argues that when a lack of resistance is misconstrued as consent, children (particularly girls) are perceived as consensual sexual partners who share in the responsibility of the sexual encounter and, therefore, are not viewed as victims. Thus, the psychological literature describing girls as “participant victims” implies that girls have a certain amount of power and control over sexual abuse perpetrated by adults (particularly men). This perpetuates the sexual exploitation of girls by reinforcing sexualized falsehoods about incest and CSA which suggest that children are responsible for the actions of their abusers (Russell, 1984; England & Thompson, 1988).

Other falsehoods about incest were introduced and perpetuated throughout the first half of the 20<sup>th</sup> century by mental health professionals, physicians and anthropologists, whose arguments included the following notions: that incest was not common among “civilized” populations (Sloane & Karpinski, 1942); incest occurred as a result of children’s unconscious desires to satisfy sexual urges (Abraham, 1927; Gordon, 1955); adult-child sexual relationships were positive experiences for children (Cormier, Kennedy & Sangowicz, 1962; Weiner, 1962); girls played an active role in provoking

sexual relationships with men (Bender & Blau, 1937; Racovsky & Racovsky, 1950; Bender & Grugett, 1952); and incest was caused by alcoholism (Riemer, 1940), intellectual deficiencies (Krafft-Ebing, 1935), or by poverty and the remoteness of rural areas, making it difficult for fathers to develop social and emotional contacts outside the family (Flugel, 1926; Riemer, 1940; Mannheim, 1946; Guttmacher, 1951).

During the 1970s and 1980s, these falsehoods and stereotypes associated with the occurrence of incest were eventually challenged by research on the prevalence and incidence of incest and CSA, including perpetrator and victim characteristics (Finkelhor, 1979, 1984, 1986; Ageton, 1984; The Badgley Report, 1984; Finkelhor & Hotaling, 1984; Kercher & McShane, 1984; Mayer, 1985; Wyatt, 1985; Wyatt & Peters, 1986; Conte, 1986; Finkelhor et.al., 1986; Bagley & Young, 1987; England & Thompson, 1988). The view of the “participant victim”, however, escaped this analysis and is still found in some late 1970s to 1990s research on counsellors’ views of victims (Gladstone, 1978; Gordon, 1988; Larson, 1993). Gladstone’s (1978) research on psychiatrists’ views of the sexual abuse of children reported that the majority of psychiatrists surveyed (52 percent, n=500) believed that sexually molested children contributed to their victimization because of “unmet sexual needs” (p. 44). Other research portrays girls as participant victims when the absence of evidence of resistance is construed as consent. In one such case study, for instance, Larson (1993) discusses her efforts as a clinician to “convince” a 9-year-old incest victim (Rachel) that she was an active and willing participant in the familial abuse she experienced:

Through continual reflection and discussion of the therapeutic relationship dynamics, Rachel was increasingly able to see the active role she’d played in her own incest (she was early on troubled by why she hadn’t “screamed” for help) and to understand how her chronically seductive mannerisms opened her to further non-familial abuse (p. 145).

Other research suggests that the language of “participant victim” has been replaced by girls who display “passive resistance” toward their perpetrators (Maisch, 1972; Ringwalt & Earp, 1988; Johnson, Owens, Dewey & Eisenberg, 1990; Collings & Payne, 1991). For example, Collings and Payne’s (1991) research on undergraduate perceptions of father-daughter incest victims used vignettes to manipulate victim age (7 and 15 years old) and the behavioural reaction to incest (resisting and passive). They find that girls described in the vignette as displaying a “passive” behavioural reaction to incest, were viewed as more blameworthy and morally responsible for their victimization than girls whose behaviour was described as “resisting” in the vignette. Such research implies that incest may only be interpreted as unwanted when girls successfully stop its occurrence. Or, as Burt and Estep (1981) describe the connection between resistance, consent, and victim status within the context of rape:

This instance on injury as proof of non-consent arises from the cultural value placed on women’s sexual integrity. In the extreme statement of this value, women are supposed to defend their sexual integrity with their lives. They should prefer death to defilement. The most credible role claimant, therefore, is the victim who nearly (or actually) died resisting an assault (p. 22).

The language of “passive resistance” suggests that resistance does occur although unsuccessfully, resulting in victims’ disclosures of sexual abuse being ignored or denied. Such a no-win situation presents girls with the challenge of having all the responsibility to protect themselves from sexual assaults without any of the power to do so.

Although early psychological literature presents somewhat conflicting views of victim responsibility regarding children sexually abused by adults, the characterization of girls as “participant victims” persists even in the more recent literature. This literature raises important research questions about counsellors’ views towards CSA victims: do

counsellors still view children as responsible for their sexual victimization? If so, under what circumstances?

### Girls As Liars: 1980s to present

A society in which adults are estranged from the world of children, and often from their own childhood, tends to hear children's speech only as a foreign language, or as a lie.... Children have been treated... as congenital fibbers, fakers and fantasizers (p. 69).

— Beatrix Campbell (1988) *Unofficial Secrets: Child Sexual Abuse*

I have illustrated that the psychological literature sexualizes CSA victims (girls in particular) and in some contexts frames them as responsible for their victimization. Other psychological works take a different direction and focus on the nature of CSA itself in such a way that the abusiveness of CSA is minimized and victim credibility is challenged (Summit, 1983; Loftus & Ketcham, 1994; Everson, Boat, Bourg & Robertson, 1996, Baines & Adler, 1996; Belknap, Holsinger & Dunn, 1997; Bond-Maupin, Maupin & Leisenring, 2002; Gaarder, Rodriguez & Zatz, 2004). In this research, victims' disclosures of sexual abuse are discredited in two ways: first, by denying the occurrence of CSA and second, by casting doubt on the "seriousness" of sexual abuse which leads to questions concerning whether children were really victimized. Plummer (1981) argues that most sexual abuse is of a less sexual nature and that "it is a stereotype that the sex act itself is damaging and dangerous and may even lead to such things as child murder" (p. 225). He then cites as evidence the high rate of occurrence of less severe types of sexual abuse (i.e. fondling) and the low incidence of child sexual murders that result from such forms of CSA. While it is true that fondling is categorized as CSA, this action is also an abuse of trust and power over children. Furthermore, to argue that less physically severe

forms of sexual abuse are less damaging to children minimizes the potentially detrimental emotional, behavioural and psychological effects experienced by victims and frames some sexually abusive behaviour as more acceptable than others. Meanwhile, statistical research from the early 1980s suggested that dangerous forms of sexual abuse were on the rise. The Badgley Report (1984) found that between 1961 and 1980, 156 child homicide victims under twenty years old were killed as a result of sexually motivated assaults:

During this period of two decades, there was a doubling in the occurrence of these deaths when they are considered by themselves and are not adjusted for the changing age composition of the Canadian population. During the peak five year period between 1971-75, this number rose [from 4 annual average deaths during 1961-1965, and 6 deaths during 1966-1970] to 13 deaths for each of 1971 and 1974, and 22 deaths during 1973. In terms of their incidence based on rates per one million children, there was an increase in the reported sexual assault child homicides from 2.9 to 7.2 per million children between 1961-80, or an overall increase of 148 per cent. The rate of these deaths peaked at 9.6 per one million children between 1971-75 (p. 277-278).

Everson, Boat, Bourg and Robertson (1996) conducted a comparative study of beliefs held by judges, law enforcement officers, mental health practitioners and child protective service workers (CPS) about sexual abuse disclosures made by children and adolescents. The authors used survey questions to evaluate the general trustworthiness of children who disclosed sexual abuse. Child variables measured in the surveys included: gender and age. Respondent variables measured included: gender, age, years of experience, and the number of CSA cases worked on the prior year. Everson, Boat, Bourg and Robertson's (1996) findings suggest that law enforcement officers and judges were more likely to disbelieve CSA disclosures compared to mental health professionals and CPS workers (p. 546). Moreover, all respondents viewed girls and adolescents as less credible in their disclosures of sexual abuse than boys and younger children (p. 549).

More recently, research examining attributions of credibility towards girl CSA victims found that probation officers have accused girls of lying about disclosed incidents of sexual abuse and have characterized girls as being promiscuous rather than as victims of abuse (Baines & Alder, 1996; Belknap, Holsinger & Dunn, 1997; Bond-Maupin, Maupin & Leisenring, 2002; Gaarder, Rodriguez & Zatz, 2004). This literature also reports that such accusations and character descriptions entailing promiscuity are not typically made of boys. In her research with therapists, general practitioners and pediatricians, DeYoung (1981) argues that counsellors' disbelief of sexual abuse allegations can be a form of victimization:

In many other, nonsexual ways incest victims have often been insidiously victimized by helping professionals. One of the most notable ways in which this has occurred is some helping professionals' refusal to believe that the person who makes an allegation is actually telling the truth (p. 92).

Barzyk, Belicki, Bell and Dunlop (1993) examined adult CSA victims' experiences with therapists and found that clients were aware of their therapists' attitudes of disbelief:

Of greatest relevance to the issue of recovered memories was the finding that participants' most frequent complaint was that their therapist ignored, dismissed or failed to appreciate the significance of the survivors' account of abuse (as cited in Belicki, 1999: 229).

Consequently, such dismissive attitudes impede counselling efforts, as victims are not acknowledged as blameless and believable by the professionals sought to render support and treatment for the abuse they endured (Parisien & Long, 1994; Campbell & Carlson, 1995; Enns, 2000). Furthermore, the medicalization of "syndromes" that validate claims of children as prone to lying and expected to retract allegations of abuse, further impede effective counselling efforts. Additionally, medicalizing expectations that children lie about being sexually abused indicate that oppressive structures are used to

define victim behaviour in ways that have the potential to contribute to children's feelings of further victimization by casting doubt on their credibility (DeYoung, 1981; Enns, 2000; Denov, 2004).

Along these lines, psychiatrist, Roland Summit (1983), based on his observations and analyses of CSA clients, formalized a child sexual abuse accommodation syndrome (CSAAS) to counter stereotypes and myths counsellors held about CSA victims. CSAAS describes how CSA victims view and cope with sexual abuse:

The most typical reactions of children are classified in this paper as the child sexual abuse accommodation syndrome. The syndrome is composed of five categories, of which [the first] two define basic childhood vulnerability and [the remaining] three are sequentially contingent on sexual assault: (1) secrecy, (2) helplessness, (3) entrapment and accommodation, (4) delayed, unconvincing disclosure, and (5) retraction. The accommodation syndrome is proposed as a simple and logical model for use by clinicians to improve understanding and acceptance of the child's position in the complex and controversial dynamics of sexual victimization (p. 177).

In contrast to the stereotype that a truthful child would immediately disclose occurrences of sexual abuse, Summit (1983) argues that the fourth category of delayed and unconvincing disclosure is typical behaviour of victims. Similarly with the last category of retraction, Summit (1983) also challenges myths about children as not credible when he argues that it is common for children to retract their disclosures of sexual abuse:

Whatever a child says about sexual abuse, she is likely to reverse it... unless there is special support for the child and immediate intervention to force responsibility on the father, the girl will follow the "normal" course and retract her complaint (p. 188).

Although Summit's "accommodation syndrome" attempts to raise awareness about the danger of counsellors' oppressive views towards CSA victims that are based on stereotypes about CSA disclosures, the way in which he explains his "syndrome" still portrays victims as prone to lying about the occurrence of sexual abuse. Furthermore, in doing so, he has not encouraged counsellors to believe children's statements about sexual

abuse. Although Summit claimed his intent was not to portray children as prone to lying about sexual abuse, the CSAAS generated some debate among feminist authors, such as Kimball (1999) and Rivera (1999), who argued that this is exactly what it did. In her assessment of the debate on recovered memories, Kimball (1999), for example, offers an alternative counselling approach focusing on clients' narrative truth:

Therapists who focus on narrative truth emphasize the client's present reconstructions or stories and the interactions between the therapist and client as the only crucial components of therapy. How the present interpretations and feelings relate to the past is irrelevant. It does not matter whether the client's story is fiction, fact or some combination of the two. What is critical are the emotions and interpersonal dynamics as they are experienced in the present. In contrast, therapists who focus on historical truth as an important component of therapy argue that some validation of what has happened in the client's past is required for successful therapy (p. 63).

The most recent development concerning victim credibility within counselling professions involves a debate about memory. This too has been medicalized as a syndrome: false memory syndrome (FMS). Advocates of FMS deny the repression of traumatic memories and promote the disbelief of CSA incidents "remembered" in adulthood by arguing that, memories of CSA are implanted by therapists' suggestive discussion and questioning techniques (Loftus & Ketcham, 1994; Brownlie, 1999). Susan Vella (1999) argues that the term "syndrome" is misleading as FMS is not a recognized medical condition and does not appear in the most recently revised version of the *Diagnostic and Statistical Manual of Mental Disorders (4<sup>th</sup> Edition)* (DSM-IVR):

FMS is nothing more than a phrase that has been coined by a private American non-profit corporation, the False Memory Syndrome Foundation (FMSF). FMS purports to describe a condition in which a patient (generally female) has been influenced, through suggestions made by her therapist, into genuinely believing that she has been the victim of historical childhood sexual abuse, when the alleged sexual abuse in fact never occurred. Women, FMS proponents suggest, are the targets of overzealous feminist therapists who are carrying forward an agenda of breaking up families (p. 136).

Such a focus on the deniability of women's disclosures of CSA and on the "devious" motives of "overzealous feminist" therapists shifts attention to the credibility

of memory and away from who is abusing whom. Rivera (1999) describes the FMSF as a reaction to greater social awareness of the occurrence of incest and CSA:

The FMSF was founded in 1992 by Pamela Freyd in what has become a very public response to her daughter's private allegation of incest by her father. The FMSF started as an advocacy group for parents who were accused of sexually abusing their children. Although no one can state this with certainty, some of its members have probably been mistakenly or falsely accused. Some of its members *did* abuse their children; certainly some of them have been convicted in a court of law of sexually abusing their children...the aim of the FMSF is to undermine the social awareness that took place in the 1980s, which led people to accept the possibility that children can be sexually exploited by those who are charged with their care. Their principle target is the community of psychotherapists who, in their view, has influenced people (and particularly women) to believe that they were sexually abused in childhood (pp. 22-23).

The controversy surrounding FMS concerns memory recall and whether memories can be repressed and then accurately recalled years later. Two of its strongest supporters, Elizabeth Loftus and Katherine Ketcham (1994), emphasize that the false memory debate is about memory and not the reality and horror of CSA and incest. Furthermore, Loftus and Ketcham (1994) argue that without evidence that repressed traumatic memories can be recalled accurately and reliably from past life experiences, doubt as to the validity of such recalled accounts must remain. This implies that victims' own accounts of the abuse experienced are not perceived as "evidence" by supporters of FMS. However, Judith Lewis Herman (1990) argues that "false memory syndrome simply does not exist, except as a defense of patriarchal power against the stories of women" (p. 182). Moreover, McFarlane & van der Kolk (1996) argue that concern over the recollection of traumatic memories is only controversial when it involves victimized girls and women but not male victims:

Interestingly, the issue of delayed recall was not controversial when Meyers (1940) and Kardiner (1941) gave detailed descriptions of it in their books on combat neuroses; when Sargant and Slater (1941) reported that 144 of 1,000 consecutive admissions to a field hospital had amnesia for their trauma; or when van der Kolk noted it in combat veterans (1989) or in a survivor of the Cocoanut Grove nightclub fire (1987). It appears that as long as men were found to suffer from delayed recall of atrocities committed either by a

clearly identifiable enemy or by themselves, the issue was not controversial. However, when similar memory problems started to be documented in girls and women in the context of domestic abuse, the news was unbearable: when female victims started to seek justice against alleged perpetrators, the issue moved from science into politics (p. 566).

The different ways that girl and boy victims are viewed by mental health professionals leads to questions about the politics of who is viewed as a victim and the role that gender plays in these perceptions. Park (1999) goes further and argues that false memory allegations are tools used to excuse the male sexual exploitation of women and girls by casting suspicion on girls' and women's ability to tell the truth about incidents of sexual abuse:

Clearly, the primary purpose of false memory allegations is to protect men accused of sexual abuse by devaluing children's and women's testimony. False memory allegations uphold patriarchy's core beliefs about the nature of men as protectors of women and children. The discounting of victims' memories of abuse often proceeds by utilizing well-known stereotypes of women as "evil" or "sick". Women who report abuse where (allegedly) no abuse occurred may be depicted as active and malicious—in short, as liars (p. 289).

Research on CSAAS and FMS centres on female victims and, aside from Summit's (1983) inclusion of boys in his broader discussion of children, does not report much on how boy victims are viewed. Moreover, the perpetrators of sexual abuse in his research are exclusively male. Summit does not consider whether perpetrator gender affects views of victim credibility.

During this time period from the 1980s to today, where the psychological literature talks about girls sexually abused by men as liars, some literature begins to emerge about girls sexually abused by women. Fitzroy's (1999) research on mother-daughter sexual abuse argues that women perpetrators have internalized misogynist attitudes toward women and will emulate male behaviour when they sexually oppress girls. This view frames female sexual aggression towards girls as driven by patriarchal motives (such as sexual privilege) to assert power and dominance. Viewing women

perpetrators in this way however, contradicts views of patriarchy that are premised on notions of power differences based on gender. Simply put, no matter how much women are perceived as adopting “male attitudes” or “male behaviours”, or are understood through male-standards of sexual offending, because of their gender, female acts of sexual aggression and oppression cannot be explained by patriarchy. Furthermore, some research on views of female sex offenders by Faller (1987) and O’Connor (1987) and Denov (2004) argue that because the idea of women as sexual perpetrators (especially against girls) does not fit comfortably with patriarchal notions of female sexuality, women perpetrators are often rendered harmless by viewing their sexually aberrant behaviour as an emotional or psychological disorder. However, Finkelhor et.al. (1986) takes an interesting twist on this contradiction and argues that: “Mental illness has not been found to be a significant factor in child sexual abuse where there are male perpetrators and there is no reason to believe that it should be a significant factor with female abusers” (p. 115).

While these constructions of women sex offenders serve to maintain or restore a patriarchal ideology of women as associated with powerlessness and “victimhood”, some works have identified other factors that explain women’s oppression of girls within a patriarchal context. Crowder (1993), for example, defines sexual abuse in terms of power imbalances rather than sexual privilege which she argues, is a more inclusive framework to account for female-perpetrated sexual abuse:

Sexual abuse is an overt or covert sexual behaviour between two individuals when the following conditions exist: the nature of the sexual act(s) is developmentally inappropriate for at least one of the participants; the balance of power and authority (meaning psychological power, economic power, role status power, etc.) between the two individuals is unequal; and the two individuals have an established emotional connection (such as between a child and a caregiver, or a child and authority figure (p. 9).

Similarly, some intersectional feminist literature (Hyde, 1990; Renzetti, 1992; Crowder, 1993; Mathews, 1995) and literature on masculinities (Bolton, 1989; Heward, 1996; Edley & Wetherell, 1996; Plummer, 2005) argue that patriarchy is not able to account for the occurrence of men who sexually oppress boys. In the next section, I examine in greater detail the psychological literature's portrayal of boy CSA and incest victims concerning clinicians' views of victim responsibility and credibility and then address the limits of patriarchy in understanding views of same-sex CSA.

### **Boys As Victims**

As with girl victims, research indicates that boys are also most frequently victimized by heterosexual men (Ellerstein & Canavan, 1980; DeJong, Emmet & Hervada, 1982; Farber, Showers, Johnson, Joseph & Oshins, 1984; Spencer & Dunklee, 1986; Reinhart, 1987; Faller, 1989; Trocmé & Wolfe, 2001; Moulden, 2007). However, unlike girls, boys often know their male perpetrators but are seldom related to them (Finkelhor, 1979; Scherzer & Palma, 1980; Kahn & Sexton, 1983; Farber, Showers, Johnson, Joseph & Oshins, 1984; Baker & Duncan, 1985; Johnson & Shrier, 1985; Pierce & Pierce, 1985). Despite research that argues that boys are sexually abused by men more often than women, the incidence rate of such abuse is described by Schultz and Jones (1983) as "invisible". Research has indicated that in general, boys are less likely to disclose incidents of sexual abuse compared to girls (Finkelhor, 1979; Finkelhor et.al., 1986). Some authors speculate that reasons for under-reported incidents of sexual abuse involving boys include the social embarrassment and fear as a consequence of our homophobic society when boys are sexually abused by men (Russell, 1984; Porter, 1986;

Sebold, 1987; Singer, 1989); and the desire to hide physical and emotional vulnerability associated with being victimized (Finkelhor, 1979; Fritz, Stoll & Wagner, 1981; Dean & Woods, 1985; Johnson & Shrier, 1985). In addition to the comparisons between girl and boy victims made in the “girls as victims” literature, this section examines more specifically the literature on boy CSA victims and counselling professionals views on responsibility and credibility with regard to boys as victims of CSA.

#### Does Perpetrator Gender Influence Perceptions of Victim Credibility and Responsibility when Victims are Boys?

Psychology research from the mid-to-late 1980s suggests that boys who do not suffer any physical trauma as a result of sexual abuse perpetrated by men, are sometimes perceived as homosexual and viewed as blameworthy because of their perceived sexual orientation (Herek, 1984; Porter, 1986; Sebold, 1987; Singer, 1989). More contemporary research by Maynard and Wiederman (1997) and Wakelin and Long (2003) supports this earlier research and argue that perceptions of victim responsibility are mediated by views of sexual orientation. Maynard and Wiederman’s (1997) research with 404 undergraduate students suggests that the harmfulness of adult-perpetrated CSA is minimized when child victims are adolescents and of opposite-sex to their perpetrators:

Scenarios depicting a 15-year old victim were rated as significantly less abusive compared to those scenarios describing a 7-year old victim...respondents rated the interaction as less abusive when it depicted an opposite sex interaction relative to same-sex interaction (p. 838).

Other research corroborates these findings by suggesting that the occurrence of same-sex CSA is more “serious” and “devastating” than opposite-sex CSA (Gartner, 1999). Wakelin and Long’s (2003) research on the effects of victim gender and sexuality on attributions of blame to adult rape victims found that:

Victims were attributed more blame if their sexual orientation suggested potential attraction to the perpetrator: gay men and heterosexual women received more blame than did lesbians and heterosexual men. Further, homophobic attitudes toward gay male victims increased the blame attributed to them: perpetrators of rape of gay men were seen as least responsible for their actions, and the character of gay male victims was seen to be a stronger contributory factor than it was for other victims (p. 477).

Spencer and Dunklee (1986) found in their study of 1,748 sexually abused children that “the majority of boys gave a clear, consistent and credible history of sexual abuse” (p.133). At first, this research seemed to suggest that boys sexually abused by men were viewed as credible in their disclosures of victimization. Further examination of this research, however, revealed that, only 160 children (9 percent) were boys, and that physical evidence of sexual abuse documented in boys’ medical records was used to corroborate children’s disclosures of sexual abuse. The boys for whom there was found to be no evidence of sexual abuse were excluded from the study (p.134). This suggests that when boys are sexually abused by men they are viewed as more credible if there is evidence of physical trauma. In the absence of physical trauma, boys are perceived as responsible for such abuse based on perceptions of homosexuality. Some research suggests that views of victim responsibility and credibility among boys are affected by perpetrator gender. Because male perpetrators are viewed as committing more invasive and violent types of sexual abuse than women perpetrators, there is both a greater likelihood of physical evidence and trauma sustained as a result of the abuse (Black & DeBlassie, 1993; Kaufman, Wallace, Johnson, & Reeder, 1995). Hence, research relying on physical evidence to bolster the credibility of boys’ disclosures of sexual abuse will fail to recognize other types of sexual abuse, and perhaps its perpetrators. This leads to questions about whether perpetrator gender also mediates views of boys as believable in their disclosures of sexual abuse.

Some research suggests that boys are more likely to be sexually abused by women than are girls (Pierce & Pierce, 1985; Dhaliwal, Gauzas, Antonowicz & Ross, 1996). Some research found that male victims of female-perpetrated sexual abuse reported difficulties in disclosing abuse for fear of not being believed by police, child protection services and therapists (Bass & Davis, 1988; Briggs, 1995). Elliot (1993) found that many male victims did not disclose abuse by a female offender and when they did, they were not believed.

In addition to questioning victim credibility upon disclosures of sexual abuse, the believability of women as sexual perpetrators challenges perceptions of female gender roles. There have been increasingly more publicized incidents of female teachers sexually abusing their male students which suggest that, contrary to earlier literature, boys are believed when they talk about being sexually abused by women. However, the most recent incidents where boys were sexually abused by their high school teachers, were not alleged by the boys themselves. Rather, the sexual abuse was “discovered” by outsiders who became suspicious of the nature of the relationship between adult and child. For instance, Mary Kay Letourneau, a 32-year-old elementary school teacher, was convicted of child rape in 1997 for having sex with her 12-year old student and served almost eight years in jail (MSNBC, [www.msnbc.msn.com/ID/5612275/](http://www.msnbc.msn.com/ID/5612275/)). This became public when “love” letters the teacher had written to her male student were found by the boy’s mother. Debra Lafave, a 23-year-old teacher was convicted in 2004 for having sex with her 14-year-old student over a period of 3 months. She was sentenced to 3 years house arrest and 7 years probation and avoided a prison sentence because her actions were attributed to a bipolar disorder (MSNBC, [www.msnbc.msn.com/id/14499056/](http://www.msnbc.msn.com/id/14499056/)). Knowledge of the

sexual nature of the relationship only became known when a mother of one of the victim's friends saw them in a car together and reported it to the victim's mother.

Kathy Denise White, a 39-year-old resource teacher, was convicted in February 2005 for having sex with her 17-year-old student twice over a four-month period (NBC, [www.nbc10.com/news/4216607/detail.html](http://www.nbc10.com/news/4216607/detail.html)). She was caught by another student who reported the incident to the school principal. Pamela Turner, an elementary school gym teacher, was 27 years old when she was also convicted in February 2005 for having sex with a 13-year-old student at his home and at school over a period of 3 months. She was sentenced to serve 9 months in jail (MSNBC, [www.msnbc.msn.com/id/8925268/](http://www.msnbc.msn.com/id/8925268/)). She too was discovered having sex at school with one of her male students. Others include, Denise McBryde, a 38-year-old high school teacher who admitted to having sex with a 15-year-old student; and Julie Feil, a 32-year-old high school English teacher, who pled guilty in 1998 to having a three-month sexual relationship with her 15-year-old student (Court TV News, [www.courttv.com/archive/trials/friedman/otherteachers.html](http://www.courttv.com/archive/trials/friedman/otherteachers.html)).

In all these cases, the boys had bragged about their experiences with their teachers to their friends. It was always parents who became suspicious and complained about sexual abuse on the part of their sons' teachers. Not one of these cases of sexual abuse features the male victim disclosing the incident of abuse and yet, all these incidents of sexual abuse were believed and taken seriously. Matthews (1996) argues that sometimes the reluctance of boys to disclose incidents of sexual abuse perpetrated by women is because of patriarchal expectations for boys to desire, seek and act in accordance with notions of male sexual privilege:

Males, generally, have more permission to be sexual persons in our society. A double standard of morality has been applied to males and females for centuries. The fact that are no "positive" or flattering terms such as "sowing his wild oats," "boys will be boys" or

“ladies man” for females gives vivid illustration to this point. It is generally assumed that having “licence” to be a sexual person is an advantage...However, sexual licence has serious consequences for male victims. It increases a boy’s susceptibility to sexual abuse by promoting or encouraging participation in sexual activities. It promotes secrecy because boys are afraid to report sexual experiences that go wrong for fear they are responsible and blameworthy. It affects our perceptions as professional caregivers, encourages victim blaming and supports minimization of the impact on victims of male-on-male sexual assault or female-perpetrated sexual assault (p. 39).

Although patriarchy provides some limited understanding for why boys may not disclose sexual abuse, this theory cannot address boys as victims of sexual abuse. Some research on critical youth studies argues that age problematizes relationships of power based on sex (Bell, 1995; Eder, 1997; Sercombe, 1998; Denov, 2004). In this way, women who are oppressed in a patriarchal structure can be empowered by their age and oppress those who are more vulnerable than themselves, such as boys.

This discussion research on clinicians’ views of incest and CSA victims, and its critique, elucidates somewhat the complexities of the relationship between victim gender and views of victim responsibility and credibility and leads to research questions about how different gender pairings of perpetrator-victim relationships might influence counsellors’ views of victim responsibility and credibility.

## **Summary**

The theme running through this literature is one of gender. Gender is important to views of victims, perpetrators and the relationships between the two and these views are further mediated by counsellors’ perceptions of victim responsibility and credibility. The early literature presented girls as responsible for their victimization regardless of their relationship to perpetrators. The early research on CSA and incest portrays girls as “seductive” when they are not biologically related to their perpetrators (Bender & Blau,

1937; Bender & Grugett, 1952) and as “participant victims” when they are (Rogers & Weiss, 1953). Furthermore, this literature does not talk about boys in these ways, even though their relationships to perpetrators are the same as those described of girls. This research is also not consistent about whether biological relatedness is used to define girls alone, or all children as responsible for their victimization. The contemporary literature portrays girls as liars (Loftus & Ketcham, 1994) and responsible for their victimization (Adams & Betz, 1993; Larson, 1993) and reflects greater consistency in differences between boys who are viewed as responsible and not credible based on perpetrator gender and mediating views of sexual orientation.

Although this literature indicates differences in how counsellors view girl and boy victims, the specific influence of perpetrator-victim relationships on counsellors’ views of victim responsibility and credibility is either not clear, as in the early literature, or not examined, as in the later literature. Research that did focus on perpetrator-victim relationships, examined only the views of undergraduate students (Waterman & Foss-Goodman, 1984; Broussard & Wagner, 1988; Fischer, 1992; Maynard & Wiederman, 1997; Wakelin & Long, 2003). Furthermore, research on the characteristic differences between CSA perpetrated by biological parents and stepparents (such as victim age of onset, severity and duration of abuse, victim feelings of anger, shame and confusion, and internalized/externalized psychological effects of abuse) provides insight into how children’s experiences may be different based on perpetrator-victim relationships (Russell, 1983, 1986; Farber, Showers, Johnsons, Joseph & Oshins, 1984; Phelan, 1986, 1995; Fischer & McDonald, 1998; Kohler, 1998; Greenberg, Firestone, Nunes, Bradford

& Curry, 2005). However, this research does not explore whether perpetrator-victim relationships *influence* clinicians' views of victim responsibility and credibility.

This body of research led me to pose the following research questions: do perpetrator-victim relationships influence counsellors' views of CSA victims? Do different familial relationships lead counsellors to view victims differently? Compared to familial CSA, does non-familial CSA elicit different views of victims among counsellors? If so, how do counsellors' views differ? Furthermore, will counsellors' views reflect differences in victim credibility based on victim gender as observed in the psychology literature on repressed memories and FMS?

## CHAPTER 4: METHODOLOGY

Despite the volume of research examining counsellors' attitudes towards CSA clients, important questions remain concerning the extent to which perpetrator-victim characteristics and counsellor characteristics influence counsellors' views of victim responsibility and credibility. More specifically, this research examines if and how: (i) perpetrator-victim characteristics: gender, relationship (biological parent, step-parent or teacher) and type of CSA (same-sex, opposite-sex); and (ii) counsellor characteristics: gender, years of counselling experience, specialization, and years of experience working with CSA victims, influence counsellors' views of victim responsibility and credibility. This is carried out by combining a mix of quantitative and qualitative methods to address counsellors' views and the extent to which these views support traditional patriarchal notions of sexual entitlement within gender roles.

### **Conducting Feminist Research with Quantitative Methods: Possible or Problematic?**

Feminist research is usually characterized by a feminist methodology. Based on Harding's (1987) explanation of the differences between "methods" and "methodology", Jayaratne and Stewart (1991) argue that feminist research is more than the sum of its methodological parts as defined by Harding:

Harding (1987) identifies "methods" as particular procedures used in the course of research (e.g., interviews), "methodology" as a theory of how research is carried out or the broad principles about how to conduct research and how theory is applied (e.g., survey research methodology or experimental methodology)... It follows from these definitions that first, quantitative and qualitative "methods" are simply specific research procedures; second, "feminist methodology" or a "feminist perspective on methodology" must be taken to refer to a much broader theory of how to do feminist research (p. 92).

Similarly, Chafetz (1988) integrates the use of methods and methodology to form a “feminist scholarship”, which she argues must meet three criteria:

First, it must be possible to use feminist scholarship to challenge the status quo that devalues women. The scholarship must be for and not merely about women. The second criterion is that feminist scholarship must analyze how gender relations are constructed. Gender must be of primary importance in feminist research. The third criterion is that feminist scholarship must problematize sexual inequality, not simply take it for granted (as cited in Risman, 1993: 15).

The research undertaken by this thesis illustrates these three principles as defined by Chafetz (1988). Firstly, I challenge the devaluation of girls portrayed in the literature as “seductive”, “participant victims” and “liars” by arguing that such constructions encourage views of girls as sexually objectified and exploitable. Secondly, I question the veracity of such portrayals as they appear in the primary literature as “scientific knowledge” and argue that such “knowledge” is socially constructed based on patriarchal values and gender norms. Thirdly, based on the reviewed literature, this thesis problematizes the sexual inequity of girls viewed as sexually exploitable while boys are not by drawing from research on masculinities and intersectional feminist works to address the occurrence of same-sex victims and boys sexually abused by women within a patriarchal context. Thus, based on these arguments, my research meets the criteria of feminist scholarship.

Feminist methodologies usually feature qualitative methods, including oral histories, interviews, ethnography or field work, that focus on intimate, empathetic and egalitarian relationships between researcher and respondent (Oakley, 1981; Risman, 1993), and permit women to express their experiences in their own voices (Smith, 1987; Jayaratne & Stewart, 1991). Hence, some feminist critiques of quantitative methods include that they: present the illusion of objectivity (Bleier, 1984; Wallston, 1986),

exploit the relationship between researcher and respondent (Reinharz, 1979; Mies, 1983); cannot access the complexities of respondents' experiences without dehumanizing respondents (Kotre, 1984), and entail biased research designs, including the selection of only male respondents upon which conclusions are drawn for women (Grady, 1981; Lykes & Stewart, 1986).

On the other hand, some feminists have argued that there is nothing intrinsic to quantitative methods that promote patriarchal analyses simply because the two have been linked historically (Stanley & Wise, 1983; Eichler, 1988; Hess, 1990; Risman, 1993); nor, as Jayaratne and Stewart (1991) argue is there anything inherently feminist about qualitative methods: "although some feminist researchers use qualitative methods to reveal important aspects of women's experience, there is no guarantee that they always will be used to do so" (p. 93).

Similarly, Risman (1993) argues that qualitative methods do not solely define research as feminist, what is important is what is done with the research which makes it feminist scholarship or not:

The important feminist issues that guide our research involve the context of discovery. What is the purpose for our research? Can it be used to further gender equity? If not, we are not doing feminist research. If, on the contrary, we ask questions that matter to women's lives, we are not merely testing irrelevant and andocentric theoretical ideas, but framing within a feminist vision. ...I believe there to be value for feminist scholars in all the methodological techniques (pp. 20-21).

Furthermore, it is not necessarily true that quantitative methods exploit the researcher-respondent relationship or that such an approach fails to access the complexities of respondents' experiences. Jayaratne and Stewart (1991) propose that quantitative methods are effective at analysing respondents' experiences without dehumanizing respondents:

Multivariate statistical analyses of large data sets may provide the most truly “contextual” analyses of people’s experience. This is because certain multivariate statistical procedures allow the incorporation of a large number of contextual variables, permitting the simultaneous testing of elaborate and complex theoretical models (p. 93).

Finally, Risman (1993) provides an overview of important research conducted by quantitative feminist empiricists:

Sprague and Zimmerman (1989) provide examples of quantitative research that are not only about women, but have explicitly benefited women. Diana Russell’s (1984) epidemiology of sexual assault makes the extent and seriousness of sexual oppression difficult to deny. Research on the impact of divorce on women’s poverty reveals the economically dependent status of many wives (Weitzman, 1985). Reskin and Hartmann’s (1986) research on comparable worth and job evaluation make it impossible to deny the continuation of gender discrimination in the labour force. Research by Blumstein and Schwartz (1983) helped American society reconceptualize the term “couple” to include not only heterosexual married, but cohabitating gay male and lesbian couples (p. 23).

This thesis addresses questions about counsellors’ attributions of victim responsibility and credibility to better understand gender inequity in counsellors’ perceptions of girl and boy CSA victims. Because of the nature of my research topic, the most effective way to address counsellors’ perceptions of CSA victims was by using a combination of both quantitative and qualitative methods. The importance of anonymity in my research was central to obtaining counsellors’ most candid opinions of victim responsibility and credibility. Thus, in order to achieve anonymity, I used a self-administered survey based on vignettes.

Vignettes have been frequently used as an effective substitute for empirical experimentation. They have become an important and integral part of the methodology of victimology research seeking to explore public and professional perceptions concerning CSA and incest by manipulating various factors related to CSA, victims, perpetrators and research participants (Garrett & Rossi, 1978; Giovannoni & Becerra, 1979; Finkelhor, 1984; Waterman & Foss-Goodman, 1984; Ringwalt & Earp, 1988; Broussard & Wagner, 1988; Podell, Kastner & Kastner, 1994). Furthermore, vignettes provide a clear context

based on specific details with which to answer survey questionnaires. The advantage to using vignettes is that they reduce ambiguity and enhance the comparability of responses because respondents are provided a common frame of reference for responding to survey questions which are based on the specific details contained in the vignettes.

Recognizing that survey questionnaires contain pre-specified response categories and not wanting to limit my participants' expression of their views, I included open-ended discussion questions to the survey. These questions provided an opportunity for counsellors to express their views in their own words and still remain anonymous. This qualitative feature expands the limits of my quantitative research design and provides a first step towards developing mixed methods for research on CSA.

Although quantitative methods are critiqued by feminists for presenting the illusion of objectivity (Bleier, 1984; Wallston, 1986), my research does not present such an illusion. My research, through the use of self-administered survey questionnaires and clear, structured and context-specific vignettes, promotes research objectivity by minimizing respondents' subjectivity when interpreting details featured in the vignettes (i.e. child characteristics, home environment, description of sexual abuse inflicted by adult, child's physical and verbal reaction to the abuse). These methodological tools also provide some distance between respondents and myself in order to encourage impartial and candid responses which contribute to research objectivity.

The quality of responses obtained using such quantitative methods have been critiqued by Kotre (1984) as not being able to access the complexities of respondents' experiences without dehumanizing research participants. To access the complexities of respondents' experiences without dehumanizing them, my research design consisted of a

combination of quantitative tools (survey and vignettes) mixed with qualitative tools (open-ended discussion questions) to provide counsellors with the opportunity to express their thoughts on CSA in their own words. A mixed methods approach allowed for the complexities of respondents' experiences to be expressed, both as counsellors working with children and as participants in my research. Based on some of the responses to the open-ended discussion questions, counsellors were quite candid about recalled incidents where they had not assumed sexual abuse but discovered it through unrelated counselling. Moreover, some counsellors talked about their interest in my research topic in a personal way and shared stories about their own experiences with sexual abuse. I can only assume from their comments, that the experience was not a dehumanizing one for them, nor one that dehumanized victimized youth. For example, respondents commented on the importance of vigilance and sensitivity in providing positive and effective counselling services. Such awareness by respondents suggests that my methods were able to provide for the articulation of professional complexities as interpreted by respondents to be communicated in a clear and unobstructed way.

Second, recognizing the complexity of this topic and how no two CSA experiences are alike, it was important to provide counsellors with a clear context and specific details about an incident of CSA. The vignettes were an important mechanism for managing complex and sometimes arbitrary interpretations of "child" and "sexual abuse". I was also very cautious in my analysis of the data, both quantitative and qualitative, in an attempt to avoid exploiting the relationship between myself as researcher and my respondents (Reinharz, 1979; Mies, 1983). As with most research of this type, participation was voluntary, all demographic information and survey responses

were kept confidential and respondent identities were always anonymous. I was also very careful to not interpret counsellors' comments or the statistical data outside of the context in which they were provided.

In response to critiques that quantitative research entails biased research designs, including the selection of only male respondents upon which conclusions are drawn for women (Grady, 1981; Lykes & Stewart, 1986), my research does not consist primarily of male respondents whose opinions are drawn upon to make claims about what female respondents think about CSA victims. My sample of counsellors consists of more women than men, yielding an unbalanced sample of counsellors. Furthermore, given my sample size, statistical comparisons between counsellor genders would result in the data becoming unstable and is not recommended (Tabachnick & Fidell, 2001). I did not perform any log transformations nor did I weight counsellors' responses to the survey questionnaire to account for an unbalanced sample between women and men counsellors. In these ways, my research does not illustrate a biased research design.

## **Methods**

### **Sample**

A total of 884 counsellors (242 men and 642 women) registered with an online national counselling organization were contacted to participate in my research on a volunteer basis (Table 1). Counsellors' contact information was obtained by visiting the organization's website and accessing the online membership directory. Two contact methods were used: (i) 801 counsellors (217 men and 584 women) received an email invitation briefly describing the nature and goals of the research and an internet link

where they could access and complete an online participation package (Appendix A), and (ii) 83 counsellors (25 men and 58 women) received a package by mail (Table 1).

**Table 1. Percentage of counsellors contacted by mail and email to participate in research**

Contact Method	Counsellor Gender		Total (N=884)
	Male (N=242)	Female (N=642)	
Mail	10.3	9.0	9.4
Email	89.7	91.0	90.6
Total	100.0	100.0	100.0

### Participation Packages

Counsellors were randomly assigned to one of twelve participation packages and organized into groups of 70-to-80 people based on their package version. The participation packages consisted of the following five documents and counsellors were instructed to proceed in the following order:

- (1) Consent Form
- (2) Part I: Vignette
- (3) Part II: 12-item survey with 2 open-ended discussion questions
- (4) Part III: Demographic survey and
- (5) Request results form and postage-paid, self-addressed envelop (mail participants)

### Consent Forms

The online consent forms contained more detailed information about the purpose of the research, participant expectations, a link to request a paper participation package and an “I consent box” (Appendix B). Counsellors could not participate online without clicking the consent box. The paper version of the consent form provided counsellors with the same information received by online participants (Appendix C).

## Measures

### *Vignettes*

Once participants consented, they were presented with a vignette describing an incident of adult-perpetrated sexual abuse against a 12-year-old child adapted from Waterman and Foss-Goodman (1984). For the purpose of this research, CSA was defined as forced sexual touching of children's body including breasts and genitals, and initial attempts at such touching, as well as children being forced to touch adults' genitals. There are three factors varied in the vignettes used for this research: Victim Gender (girl, boy), Perpetrator-Victim Relationship (biological parent, stepparent and teacher), and Perpetrator Gender (male, female). The combinations of these independent variables (2 x 3 x 2 design) results in 12 vignette versions (Appendix D). An alternate grouping for child and perpetrator gender results in a fourth independent variable "Type of Sexual Abuse" identified by incest and CSA victims of same- or opposite-sex to their perpetrators.

Recognizing that views of these relationships will be influenced by intersections of power relations based on age and race, I have included them as constant variables in my vignettes. Age and race are not used as independent variables because that would have led to an excessive number of vignettes (a minimum number of two groups for both additional variables would result in a minimum number of 48 vignette versions) and a project with a scope beyond that feasible for an independent Master's research project. However, while age, race and class were treated as constants, the vignette for this project did provide sufficient detail on the variation in perpetrator-victim relationships to test specifically how these independent variables would affect participants' responses to the

vignettes (Braspenning & Sergeant, 1994; Hughes, 1998). Some prior research on professionals' attitudes towards CSA are problematic because they either did not provide respondents with a specific definition of what constituted sexual abuse, or they did not clearly define perpetrator and victim characteristics before surveying attitudes about CSA (Kaufman, Peck & Tagiuri, 1954; LaBarbera, Martin & Dozier, 1980; Kendall-Tacket & Watson, 1991; Adams & Betz, 1993; Reidy & Hochstadt, 1993; Everson, Boat, Bourg & Robertson, 1996). Moreover, a specific contextual framework achieved through the use of vignettes increases the comparability of participants' responses because a common representation is used to measure concepts of victim, perpetrator and sexual abuse.

Caucasian was selected as the race for the vignettes to eliminate any preconceived notions about CSA and minority populations from the responses. Age of 12 was chosen for the victims described in the vignettes because prior empirical research finds the highest incidence of CSA for both girls and boys between the ages of 11 to 15 (Bagley, 1984; Finkelhor, 1994; Canadian Centre for Justice Statistics, 2001; Trocmé & Wolfe, 2001).

#### *Victim Responsibility and Credibility Survey*

After respondents read the assigned vignette, they were asked to complete a 12-item survey scored along a 7-point Likert-type scale. The scores on the scale ranged from "strongly disagree" (1) to "strongly agree" (7), with a middle option of "I don't know" (4) (Appendix E). The children are named "Rachel" and "Robert" and the adults are named "Cathy" and "Keith". Items 1 to 6 measure perceptions of Victim Responsibility:

- (1) Rachel/Robert is not responsible for what happened with Cathy/Keith.
- (2) If Rachel/Robert were older she/he could have stopped what happened with Cathy/Keith.
- (3) Rachel/Robert could have prevented Cathy's/Keith's sexual advances if she/he wanted to.
- (4) Rachel/Robert encouraged Cathy/Keith to start playing the game by smiling at her/him when she/he walked into the room.
- (5) Rachel/Robert resisted Cathy's/Keith's sexual advances as best she/he could.
- (6) Rachel/Robert appeared to be a willing participant in Cathy's/Keith's game.

Items 7 to 12 measure perceptions of Victim Credibility:

- (7) Rachel/Robert was sexually abused in this incident.
- (8) It is likely that Rachel/Robert exaggerated what happened with Cathy/Keith.
- (9) Rachel/Robert was not forced to do anything she/he did not want to do.
- (10) Because Rachel/Robert is so young it is hard to believe her/his story.
- (11) Rachel/Robert is unlikely to be traumatized by what happened with Cathy/Keith.
- (12) Cathy/Keith has warm personal feelings for Rachel/Robert.

Victim Responsibility is measured by summing questions 1 to 6 and Victim Credibility is the sum of questions 7 to 12. Possible scores range from 6 to 42 for each scale. Items 1, 5 and 8-11 are negatively worded to avoid response set bias, and as such, the scoring for these items is reversed. For both scales, higher scores reflect greater views of Victim Responsibility and Victim Credibility attributed towards CSA victims.

The items used to measure the concepts of Victim Responsibility and Victim Credibility are specific to assessing perceptions of the victims' role in adult-child sexual abuse situations. Earlier research using attitude scales to measure perceptions of sexual assault victims, such as the Jackson Incest Blame Scale (JIBS) and the Attribution of Rape Blame Scale (ARBS) measured degree of blame attributed on four broad levels: situational, victim, societal and offender (Resick & Jackson, 1981; Jackson & Ferguson, 1983) without defining in what specific capacity victims are to blame, such as responsibility or credibility. Some authors have argued that there are important

conceptual differences between blame and responsibility (Shaver & Drown, 1986; Weiner, 1995; Maynard & Wiederman, 1997). Furthermore, the JIBS is limited to incest cases, and the ARBS reflects a gender bias with specific reference to female rape victims only. The items selected for this survey specifically address the concepts of Victim Responsibility and Victim Credibility within a context of familial and non-familial CSA without sex bias.

There are also unique advantages to administering survey-questionnaires using the internet. When completing the online survey, if participants forgot to answer one of the twelve survey items a “response confirmation” page notified participants of the items they missed and asked them to go back and complete these items (Appendix F). This feature illustrates an advantage of using online surveys by reducing the number of missed items and minimizing the number of incomplete surveys received. Once all items were answered an additional “response confirmation” page informed participants that they had successfully completed the survey-questionnaire and could proceed to the next section (Appendix G).

#### *Open-ended Discussion Questions*

Once the 12 survey items were complete, respondents were presented with two open-ended discussion questions designed to provide an opportunity to further explain their responses and to express comments on the vignette (Appendix H). If online participants did not complete the first open-ended question, a “response confirmation” page once again notified participants to go back and complete the question before proceeding to the next section.

### *Demographic Survey*

Respondents were also provided with a demographic survey where they were asked to indicate their sex, years of counselling experience, area of specialization, years of experience counselling CSA clients, and current province of occupation (Appendix I). For online participants, if any of the demographic survey questions were left blank, a “response confirmation” page asked them to complete the questions. Upon completion of the demographic survey, online participants clicked on the “submit” button to email their responses to me, and were presented with a “request results” form (Appendix J). Participants who were mailed a participation package received a postage-paid, self-addressed envelop to submit their surveys and they too were also provided with a “request results” form.

To encourage a higher participant response rate, follow-up email reminders were sent to counsellors two weeks, three weeks and four weeks after the initial emailing. In order to obtain a balanced distribution of responses from all twelve vignette versions, a quota sampling method was used each time I sent out a reminder-email. Once I achieved at least ten survey responses for a particular vignette version, I stopped sending out reminder emails for that particular vignette and increased reminders for other vignette versions until I had at least ten responses for each vignette version. No reminders were mailed to counsellors contacted by mail because of lack of funds.

### Ethical Considerations

Conducting research over the internet using email is an increasingly utilized research tool because it is both efficient and inexpensive (Schmidt, 1997; Buchanan &

Smith, 1999). This does not mean, however, that security and privacy issues should be compromised. Participant anonymity was ensured through three procedures. First, participants' email addresses were entered in large groups in the "beta carbon copy" (bcc) address line to maintain anonymity amongst participants while allowing counsellors to be contacted as efficiently as possible. Secondly, participants were not asked to identify themselves or to disclose any personal information that could lead to the association of their identity with their specific survey responses. Finally, when participants submitted their completed survey via email, it was actually not the respondent who "sent" the email. Rather, Saint Mary's University email server prepared and sent respondents' emails to me. As such, a return email address could not be used to trace from where or by whom the emails were sent. At no point were respondents asked to enter their own email addresses. Even when respondents requested paper versions of the survey, or to receive the results information page, their contact information was received separately from their completed survey. This made it very difficult to associate specific responses with a particular person.

Participant confidentiality was ensured through the following three procedures: first, the internet surveys were loaded onto a University web server and therefore protected by the University's firewall. Second, access to the internet surveys could only be achieved through the internet links themselves, which were emailed to potential participants. Finally, the only way to access participants' responses was through my personal University email which requires an account user name and password.

## CHAPTER 5: RESULTS

In this chapter I present my quantitative analysis of the relationships between perpetrator-victim and counsellor characteristics and counsellors' views of victim responsibility and credibility. I begin by using descriptive statistics to describe the sample of 149 counsellors. This includes an examination of the survey return rate, demographic distribution of the sample, and a description of the dependent and independent variables. Next, I use a logistic regression analysis to examine whether a set of perpetrator-victim and counsellor characteristics can predict counsellors' views of victim responsibility and credibility, and if such predictions can be generalized to the population of counsellors from which the sample was drawn.

Although survey research of this nature consisting of variable manipulation is often analyzed using analysis of variance (ANOVA) (Waterman & Foss-Goodman, 1984; Broussard & Wagner, 1988; Collings & Payne, 1991; Kendall-Tackett & Watson, 1991; Adams & Betz, 1993; Wagner, Kilcrease-Fleming, Fowler & Kazelskis, 1993; Everson, Boat, Bourg & Robertson, 1996) the data obtained by my research does not meet the assumptions required for ANOVA. Alternatively, arguments are made to support the selection of a logistic regression analysis as most appropriate given the nature of my data.

### **Descriptive Statistics**

#### Survey Return Rate

The final sample consists of 149 respondents: 121 female (81.2 percent) and 28 male (18.8 percent) (Table 2). Almost three times as many female counsellors were contacted than male counsellors, and about four surveys were received from female

counsellors for every one completed survey received from male counsellors (Table 2). Therefore, the survey return rate approximates proportionality and is representative of the number of male and female counsellors contacted to participate in the research. In other words, the sample of respondents, by sex, is representative of the population of counsellors from which they were selected. The total return rate for all counsellors contacted to participate in the research is 16.9 percent (Table 3). Table 3 also indicates that female counsellors had a higher survey return rate (18.8 percent) compared to male counsellors (11.6 percent) (Table 3).

**Table 2. Percent of male and female counsellors in the sample and contacted to participate in the research**

Counsellor Gender	Respondents (N=149)	Counsellors contacted (N=884)
Male	18.8	27.4
Female	81.2	72.6
Total	100.0	100.0

**Table 3. Return rate for all counsellors contacted to participate in the research (%)**

Counsellors Contacted		
Male (N=242)	Female (N=642)	Total (N=884)
11.6	18.8	16.9

Table 4 illustrates a higher return rate for counsellors who responded by mail (25.3 percent) compared to email surveys (16 percent) respectively. This is interesting given that the majority of participants responded by email (85.9 percent, Table 5), yet the smaller proportion of participants who responded by mail (13.1 percent, Table 5) gave a higher return rate (Table 4). Women had a higher return rate whether contacted by mail (31 percent) or email (17.6 percent) compared to men who had a return rate of 12 percent for mail and 11.5 percent for email responses (Table 4). There were no incomplete returned surveys from either email or mail respondents.

**Table 4. Survey returns by response method and Counsellor Gender (%)**

Counsellors' Response Method					
Mail			Email		
Male (N=25)	Female (N=58)	Total (N=83)	Male (N=217)	Female (N=584)	Total (N=801)
12.0	31.0	25.3	11.5	17.6	16.0

**Table 5. Percent of survey returns in sample by response method (N=149)**

Counsellors' Response Method	
Mail	85.9
Email	13.1
Total	100.0

Given the less than 100 percent return rate, it was impossible to ensure equal responses for all twelve vignette versions. Table 6 lists the total number of returned surveys and their corresponding vignette versions. The table also shows an equal number of returned vignette versions and an unequal number of male and female counsellors. This is largely because there are simply more female than male counsellors listed in the online membership directory.

**Table 6. Number of surveys and corresponding vignette versions returned by counsellors**

Vignette Version	Counsellor Gender		Total (N)
	Male (N)	Female (N)	
Mother & daughter	4	10	14
Father & daughter	3	9	12
Stepmother & stepdaughter	1	12	13
Stepfather & stepdaughter	3	9	12
Female teacher & female student	1	12	13
Male teacher & female student	3	7	10
Mother & son	2	10	12
Father & son	1	10	11
Stepmother & stepson	1	11	12
Stepfather & stepson	5	6	11
Female teacher & male student	1	9	10
Male teacher & male student	3	16	19
<b>Total</b>	<b>28</b>	<b>121</b>	<b>149</b>

Although mail surveys are argued by some to yield the lowest response rates among quantitative research methods (Kaplowitz, Hadlock & Levine, 2004; Neuman, 2004), there are ways of minimizing non-response rates which were incorporated into my methodology. First, my research topic was of interest to the population of counsellors contacted to participate. This, according to Groves, Presser and Dipko (2004), has the

potential to increase survey response rates by 40 percent compared to surveys with topics that are not likely to be of interest to sample populations. Second, I employed the multimode approach developed by Schaefer and Dillman (1998) to administer participation packages by offering counsellors the option of participating online or by mail. According to Schaefer and Dillman (1998), this technique yields higher response rates than single mode distributions of survey questionnaires. As shown in Table 3, the use of mail surveys in addition to web-based surveys provided me with 21 additional participants (25.3 percent).

Third, the use of the internet to administer survey questionnaires is a time efficient and inexpensive way to conduct quantitative research (Schmidt, 1997; Buchanan & Smith, 1999). This method enabled me to contact large groups of people and to target a specific population of counsellors currently working in Canada and to draw broader generalizations about counsellors' views than a smaller localized sample would allow (Barter & Renold, 2000; Finch, 1987). Finally, given the sensitive nature of the research topic, the use of web-based and mail surveys provided a method of administering questionnaires and collecting data with a high level of anonymity. Some authors argue that ensuring high levels of anonymity increases self-esteem and reduces social anxiety and social desirability effects thereby contributing to more candid participant responses (Coomber, 1997; Joinson, 1999).

### Demographic Distribution of Sample

Tables 7 and 8 provide information on the demographic distribution of respondents. The majority of respondents have 10 or less years of counselling experience (57.7 percent), with a range of 1 to 35 years experience (M=11.2, SD=7.8) (Table 7).

**Table 7. Demographic distribution of sample: Continuous variables**

	Years of Counselling Experience	Years Experience Working with CSA clients
N	149	149
Mean	11.2	4.6
Median	10	2
Mode	10	0
Std. Deviation	7.8	6.7
Range	34	30
Minimum	1	0
Maximum	35	30

Table 8 shows that most respondents have a specialization in sexual abuse and trauma including counselling child or adult sexual abuse victims and trauma related issues, such as domestic violence and physical abuse (25.5 percent). Men and women respondents differ in specialization area. Many male respondents have a specialization in areas of individual and group counselling surrounding grief and loss, spiritual counselling, child protection services, career counselling and working with people who have disabilities (32.1 percent). These are categorized as “other” in Table 8. Alternatively, female counsellors are most concentrated in areas of sexual abuse and trauma counselling (28.1 percent) (Table 8).

**Table 8. Demographic distribution of sample: Categorical variables**

	Counsellor Gender		Total (N=149)
	Male (N=28)	Female (N=121)	
<b>Specialization area</b>			
Mental health	14.3	15.7	15.4
Sexual abuse/trauma	14.3	28.1	25.5
School counsellor	14.3	9.1	10.1
Family, couples & relationship	25.0	24.0	24.2
Other	32.1	23.1	24.8
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>Experience counselling CSA victims</b>			
No	35.7	45.5	43.6
Yes	64.3	54.5	56.4
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>Province/territory of occupation</b>			
YT	0.0	0.8	0.7
NL	7.1	2.5	3.4
PEI	0.0	5.8	4.7
NS	7.1	11.6	10.6
NB	3.6	9.9	8.7
QC	3.6	3.3	3.4
ON	28.6	28.9	28.9
MB	3.6	3.3	3.4
SK	10.7	3.3	4.7
AB	0.0	5.0	4.0
BC	35.7	25.6	27.5
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Furthermore, although the majority of respondents report experience counselling CSA clients (56.4 percent) (Table 8), only 26.2 percent with such experience specialize in sexual abuse and trauma counselling (Table 9). This finding suggests that counselling services are offered to CSA victims by professionals who do not specialize in abuse or trauma related areas. More female respondents specialize in sexual abuse and trauma (28.8 percent) compared to male counsellors (16.7 percent) (Table 9). The majority of respondents report 2 or less years experience counselling CSA clients (51.2 percent), with a range of 0 to 30 years ( $M=4.6$ ,  $SD=6.7$ ) (Table 7). Finally, most respondents currently work in Ontario (28.9 percent) and British Columbia (27.5 percent) (Table 8).

**Table 9. Percent of counsellors who have experience working with CSA clients by Specialization (N=84)**

Specialization	Counsellor Gender		Total
	Male	Female	
Mental health	11.1	13.6	13.1
Sexual abuse/trauma	16.7	28.8	26.2
School counsellor	16.7	13.6	14.3
Family, couples & relationships	38.8	28.8	30.9
Other	16.7	15.2	14.3
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

### Description of Dependent Variables

Table 10 illustrates descriptive statistics for Victim Responsibility and Victim Credibility scores, including measures of central tendency, variability, deviation from normality and size. Coolican (2004) states that a rule of thumb for deciding when a distribution seriously departs from “normal”, is when the skewness statistic is greater than twice the value of its standard error. Table 10 indicates a positively skewed distribution of Victim Responsibility scores and a negatively skewed distribution of Victim Credibility scores. Because of the skewed nature of the data, the median rather than the mean is used to descriptively analyze both dependent variables. The median is the most appropriate measure of central tendency to use for this type of data because, unlike the mean, it does not move in response to skewed distributions and it produces the smallest absolute error (Loether & McTavish, 1980; Weisburd, 1998).

**Table 10. Descriptive statistics for the dependent variables (Victim Responsibility and Victim Credibility)**

	Victim Responsibility	Victim Credibility
N	149	149
Mean	9.80	38.46
Std. Error of Mean	.322	.364
Median	9.00	39.00
Mode	6	42
Std. Deviation	3.935	4.447
Skewness	1.930	-2.510
Std. Error of Skewness	.199	.199
Range	26	27
Minimum	6	15
Maximum	32	42

### *Victim Responsibility*

Graph 1 illustrates the frequency distribution of respondents' victim responsibility scores. A score of 6 indicates the lowest possible score obtainable, meaning that counsellors do not view children described in the vignettes as responsible for their own victimization. Graph 1 shows that 32 respondents scored the lowest victim responsibility score possible and 24 respondents scored the next lowest possible score of 7. This finding indicates that approximately one third of the respondents (37.6 percent, N=149) do not perceive the children described in the vignettes as responsible for their own victimization (Table 11). Scores this low suggest that some respondents do not consider children to be responsible for sexual abuse under any circumstances. Counsellors' written responses (of those who scored a 6 or 7 for Victim Responsibility) to the two open-ended questions support this interpretation, as some expressed that abuse is *never* the child's responsibility:

No child is responsible for abuse by an adult. [Female respondent, mother-daughter]

Child abuse is NEVER the fault of the child and they are never to blame. [Female respondent, mother-daughter]

No child is ever responsible for the actions of their sexual abuser. [Female respondent, stepfather-stepdaughter]

Children are never responsible for adults abusing their position of authority/power. [Female respondent, female teacher-female student]

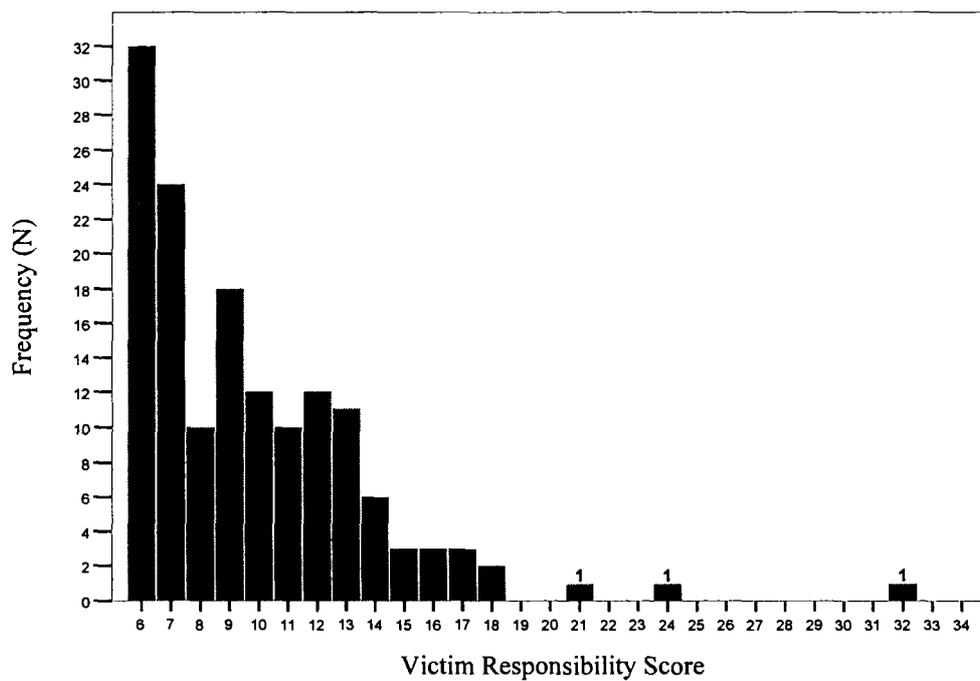
I have worked with sexual abuse survivors for 14 years. I am well aware of the confusion and mixed feelings caused by sexual abuse, especially if the abuse is not violent or painful, and perpetrated by someone the child trusts and loves. Nonetheless, it is abuse, and as such it is always the responsibility of the perpetrator. [Female respondent, mother-son]

Sexual abuse of children is never the victims' fault. [Male respondent, male teacher-male student]

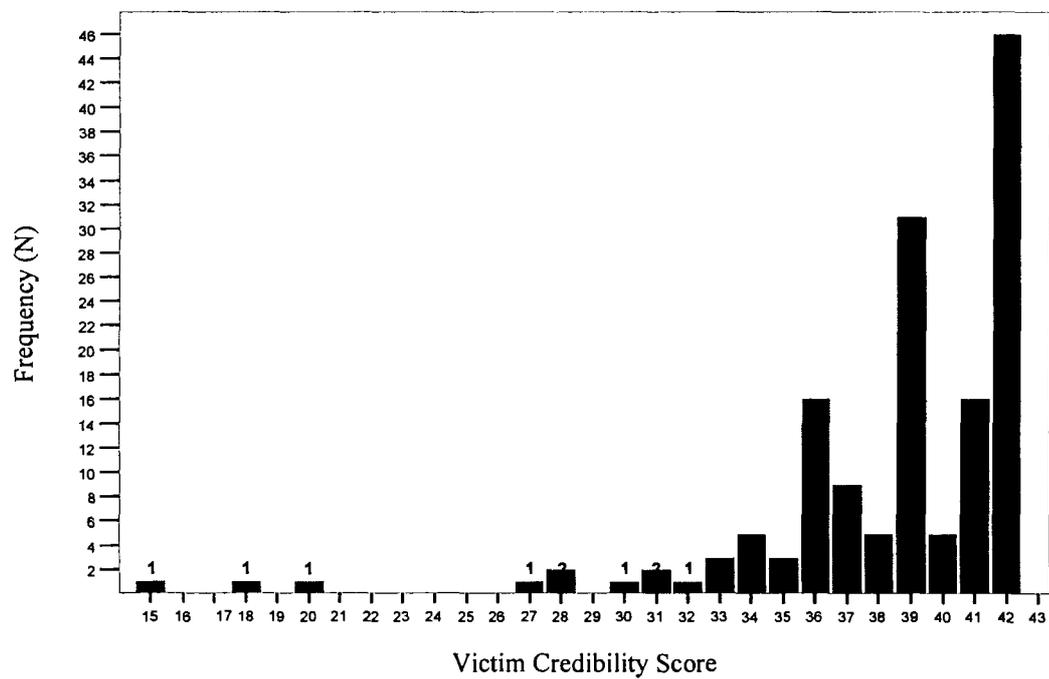
### *Victim Credibility*

Graph 2 illustrates the frequency distribution of counsellors' victim credibility scores. A score of 42 indicates the highest score obtainable and represents respondents' views of the children described in the vignettes as the most credible in their allegations of sexual abuse. Graph 2 also shows that 46 respondents scored a 42, and 16 respondents scored the next highest possible score of 41. In other words, 62 respondents, less than half (41.6 percent, N=149) view the children described in the vignettes as believable in their allegations of sexual abuse (Table 11). These counsellors are not likely to view children who disclose sexual abuse as lying under any circumstances suggested by written responses to the two open-ended discussion questions of counsellors who scored a 42 or 41:

**Graph 1. Distribution of Counsellors' Victim Responsibility Scores**



**Graph 2. Distribution of Counsellors' Victim Credibility Scores**



Father was in a position of power, was the adult and therefore responsible for what happened. He broke trust and boundaries between father and daughter. Even if she were to initiate it is up to the father to teach what is appropriate and what's not. Children do not usually make up these things and generally are not willing to talk about it. [Female respondent, father-daughter]

I have training in working with traumatized children. I am also a sexual abuse therapist and work with children and youth who have been abused. Therefore I know first hand the facts and myths about SA [sexual abuse]. It is very rare that children would make up such stories. [Female respondent, stepmother-stepdaughter]

Children do not lie about sexual abuse. [Female respondent, stepmother-stepson]

I would hope that not many counsellors would question the child's version of what happened to him. Children are to be believed. [Female respondent, father-son]

I certainly hope that people working with children are sensitive to such issues like sexual abuse & are vigilant when there is disclosure so the child is taken seriously—not being judged but protected. [Female respondent, father-son]

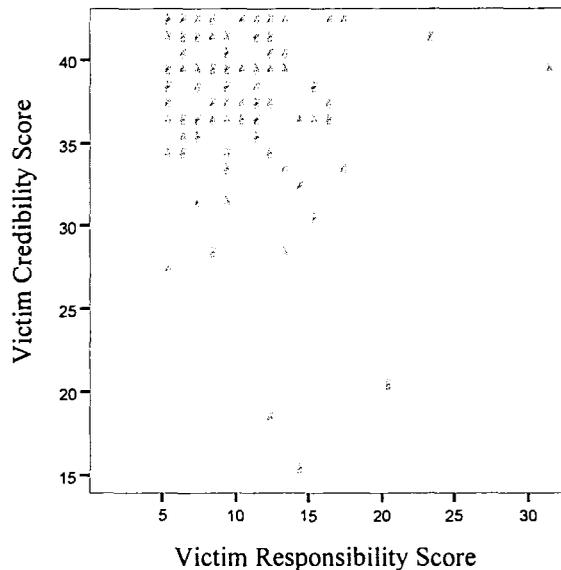
I believe that Cathy [adult] was in a position of power and control and she knew that and used it to get what she wanted from Robert [child]....I truly believe he did all he could, given the power imbalance, to stop it. I also have found that kids do not tend to make up or exaggerate these types of stories. If anything, I have found that they tend to minimize them. [Female respondent, stepmother-stepson]

My experience with young children who report sexual abuse is that they rarely, if ever, lie about the incident(s). [Female respondent, stepmother-stepson]

Upon further examination of the distribution of Victim Responsibility and Victim Credibility scores in Graphs 1 and 2, there appears to be an association between these two dependent variables whereby; high frequencies of low responsibility scores occur with high frequencies of high credibility scores. The scatterplot in Graph 3 illustrates the clustering of respondents' scores in the upper left quadrant of the graph. This suggests that many respondents view victims as credible and not responsible. Spearman's Rank Order Correlation ( $r_s$ ) is used to examine the direction and strength of this association on a standardized scale between -1 (perfect negative relationship) and +1 (perfect positive relationship), with a score of 0 indicating no association between variables (Babbie, Halley & Zaino, 2003; Weisburd, 1998). This non-parametric alternative to Pearson's  $r$ -

correlation is argued by Weisburd (1998) to be a more appropriate strength of association test when data are not normally distributed. The results suggest a moderate negative association between respondent's views of Victim Responsibility and Victim Credibility [ $r_s = -0.228$ ,  $p = 0.01$ ,  $n = 149$ ], with high Victim Credibility scores associated with low Victim Responsibility scores.

Finally, the skewed nature of both dependent variable distributions (Graphs 1 and 2) suggests that there are clear categorical distinctions within Victim Responsibility and Victim Credibility scores. These scores suggest that, while some respondents clearly do not view children as responsible (scores of 6 and 7) and believe their disclosures of abuse (scores of 42 and 41), other respondents exhibit greater variability in their attributions of Victim Responsibility and Victim Credibility. For this reason, the continuous dependent variables of Victim Responsibility scores and Victim Credibility scores are transformed into dichotomous variables. Victim Responsibility scores of 6 and 7 represent views of "the victim is not responsible" and scores of 8-32 represent views of "the victim is responsible" (Table 11). Victim Credibility scores of 42 and 41 represent views of "the victim is credible" and scores of 40-15 represent views of "the victim is not credible" (Table 11). Table 11 specifically identifies 28 respondents (18.8 percent) who view victims as both not responsible and credible. Most importantly, the descriptive analysis shows that two thirds of counsellors (62.4 percent,  $N = 149$ ) see an element of responsibility and slightly more than half (58.4 percent,  $N = 149$ ) see some lack of credibility in children's disclosures of sexual abuse (Table 11).

**Graph 3. Scatterplot of the Relationship between Respondents' Victim Responsibility and Credibility Scores****Table 11. The percentage of counsellors' attributions of Victim Responsibility and Victim Credibility scores (N=149)**

Victim Responsibility	Victim Credibility		Total
	Not Credible (scores of 15-40)	Credible (scores of 41 & 42)	
Not responsible (scores of 6 & 7)	18.8	18.8	37.6
Responsible (scores of 8-32)	39.6	22.8	62.4
<b>Total</b>	<b>58.4</b>	<b>41.6</b>	<b>100.0</b>

### Description of Independent Variables

#### *Perpetrator-victim Relationship*

Table 12 examines counsellors' views of victim responsibility and credibility by perpetrator-victim relationships and shows a small gradual decline in the number of counsellors who view children as credible and not responsible as perpetrator-victim relationships move away from familial. This suggests that a fewer number of counsellors view children as credible and not responsible when abused by teachers (17.3 percent) compared to step-parents (18.8 percent) and biological parents (20.4 percent).

Three times the number of counsellors who view victims as responsible also view children sexually abused by their biological parents as not credible (N=21) compared to credible (N=7) in their disclosures of sexual abuse. This suggests that children viewed as responsible for sexual abuse perpetrated by step-parents and teachers have a lesser chance of being disbelieved (1.3 times and 1.5 time more likely respectively) compared to children sexually abused by their biological parents, who are 3 times as likely to be disbelieved. This suggests further that children sexually abused by biological parents are most vulnerable to not being believed in their disclosures of sexual abuse.

**Table 12. Counsellors' views of Victim Responsibility and Victim Credibility by Perpetrator-victim Relationship**

Perpetrator-victim Relationship	Victim Responsibility	Victim Credibility				Total	
		Not Credible		Credible		N	%
		N	%	N	%		
Biological Parents	Not Responsible	11	22.4	10	20.4	21	42.8
	Responsible	21	42.9	7	14.3	28	57.2
	<b>Total</b>	<b>32</b>	<b>65.3</b>	<b>17</b>	<b>34.7</b>	<b>49</b>	<b>100.0</b>
Step-parents	Not Responsible	9	18.8	9	18.8	18	37.6
	Responsible	17	35.3	13	27.1	30	62.4
	<b>Total</b>	<b>26</b>	<b>54.1</b>	<b>22</b>	<b>45.9</b>	<b>48</b>	<b>100.0</b>
Teachers	Not Responsible	8	15.4	9	17.3	17	32.7
	Responsible	21	40.4	14	26.9	35	67.3
	<b>Total</b>	<b>29</b>	<b>55.8</b>	<b>23</b>	<b>44.2</b>	<b>52</b>	<b>100.0</b>

### *Victim Gender*

Table 13 illustrates that a higher number of counsellors view boys as responsible (70.7 percent) compared to girls (54.1 percent). This is interesting given that an almost equal number of counsellors have similar views of victim credibility for both girls and boys (Table 13). This suggests that even though more counsellors view boys as responsible compared to girls, the number of counsellors are less divided concerning their views of victim credibility.

**Table 13. Counsellors' views of Victim Responsibility and Victim Credibility by Victim Gender**

		Victim Gender			
		Boys		Girls	
		N	%	N	%
Victim Responsibility	Not Responsible	22	29.3	34	45.9
	Responsible	53	70.7	40	54.1
	<b>Total</b>	<b>75</b>	<b>100.0</b>	<b>74</b>	<b>100.0</b>
Victim Credibility	Not Credible	45	60.0	42	56.8
	Credible	30	40.0	32	43.2
	<b>Total</b>	<b>75</b>	<b>100.0</b>	<b>74</b>	<b>100.0</b>

### *Perpetrator Gender*

When perpetrators are women, a greater number of counsellors view victims as responsible (67.6 percent) compared to victims of male-perpetrated CSA (57.3 percent), and almost an equal number of counsellors disbelieve children's disclosures of abuse when the perpetrators are women (59.5 percent) and men (57.3 percent) (Table 14). This suggests that perpetrator gender does not seem to influence counsellors' views of victim credibility because children are disbelieved whether they are abused by a man or a woman. However, further examination suggests that when children's allegations are not believed, three times as many counsellors view victims of female-perpetrated CSA as "responsible" (N=33) compared to "not responsible" (N=11), while only 1.5 times more counsellors view victims of male-perpetrated CSA as "responsible" (N=26) compared to "not responsible" (N=17) (Table 14). This means that when children's disclosures of sexual abuse are doubted, a greater number of counsellors view victims sexually abused by women as responsible.

**Table 14. Counsellors views of Victim Responsibility and Victim Credibility by Perpetrator Gender**

Perpetrator Gender	Victim Responsibility	Victim Credibility				Total	
		Not Credible		Credible		N	%
		N	%	N	%		
Male	Not Responsible	17	22.7	15	20.0	32	42.7
	Responsible	26	34.6	17	22.7	43	57.3
	<b>Total</b>	<b>43</b>	<b>57.3</b>	<b>32</b>	<b>42.7</b>	<b>75</b>	<b>100.0</b>
Female	Not Responsible	11	14.9	13	17.5	24	32.4
	Responsible	33	44.6	17	23.0	50	67.6
	<b>Total</b>	<b>44</b>	<b>59.5</b>	<b>30</b>	<b>40.5</b>	<b>74</b>	<b>100.0</b>

### *Type of Sexual Abuse*

In general, Table 15 illustrates that a greater number of counsellors view same-sex CSA victims as responsible (65.4 percent) and credible (46.9 percent) compared to opposite-sex victims (59 percent and 35.2 percent respectively).

**Table 15. Counsellors views of Victim Responsibility and Victim Credibility by Type of CSA**

Type of CSA	Victim Responsibility	Victim Credibility				Total	
		Not Credible		Credible		N	%
		N	%	N	%		
Opposite-sex	Not Responsible	16	23.4	12	17.6	28	41.0
	Responsible	28	41.4	12	17.6	40	59.0
	<b>Total</b>	<b>44</b>	<b>64.8</b>	<b>24</b>	<b>35.2</b>	<b>68</b>	<b>100.0</b>
Same-sex	Not Responsible	12	14.8	16	19.8	28	34.6
	Responsible	31	38.3	22	27.1	53	65.4
	<b>Total</b>	<b>43</b>	<b>53.1</b>	<b>38</b>	<b>46.9</b>	<b>81</b>	<b>100.0</b>

### *Counsellor Gender*

Table 16 shows that despite an unequal number of male and female counsellors in my sample, similar proportions of male and female counsellors view victims as responsible for their victimization (64.3 percent for male counsellors and 62 percent for female counsellors) and not credible in their disclosure of sexual abuse (53.6 percent for male counsellors and 59.5 percent for female counsellors). This suggests that counsellor gender does not influence views of victim responsibility and credibility. However,

because there are more than four times as many women counsellors than men counsellors, the trend between counsellor gender and victim responsibility and credibility should be interpreted cautiously.

**Table 16. Counsellors views of Victim Responsibility and Victim Credibility by Counsellor Gender**

		Counsellor Gender			
		Male		Female	
		N	%	N	%
Victim Responsibility	Not Responsible	10	35.7	46	38.0
	Responsible	18	64.3	75	62.0
	<b>Total</b>	<b>28</b>	<b>100.0</b>	<b>121</b>	<b>100.0</b>
Victim Credibility	Not Credible	15	53.6	72	59.5
	Credible	13	46.4	49	40.4
	<b>Total</b>	<b>28</b>	<b>100.0</b>	<b>121</b>	<b>100.0</b>

#### *Years Counselling Experience*

Table 17 illustrates that counsellors with more than 13 years experience view victims as responsible (56.2 percent) less frequently than counsellors with 7 to 13 years (66.7 percent) and 6 or less years experience (64 percent). Counsellors with more than 13 years experience also view children as credible (35.4 percent) as do counsellors with 7 to 13 years experience (35.3 percent), but not as credible as do respondents with 6 or less years experience (54 percent) (Table 17). This suggests that counsellors with more years of experience view children as responsible for their victimization compared to those with fewer years of experience. However, counsellors with fewer years experience are more likely to believe children's disclosures of sexual abuse.

**Table 17. Counsellors' views of Victim Responsibility and Victim Credibility by Years of Counselling Experience (%)**

		Years of Counselling Experience		
		0-6 (N=50)	7-13 (N=51)	More than 13 (N=48)
Victim Responsibility	Not Responsible	36.0	33.3	43.8
	Responsible	64.0	66.7	56.2
	<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
Victim Credibility	Not Credible	46.0	64.7	64.6
	Credible	54.0	35.3	35.4
	<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

*Specialization*

Table 18 shows that a greater number of counsellors who specialize in sexual abuse and trauma view victims as credible (44.7 percent). Also, of all the counsellors who view victims as responsible, those who specialize in sexual abuse and trauma are fewest in number (52.6 percent) compared to counsellors who specialize in other areas.

**Table 18. Counsellors' views of Victim Responsibility and Victim Credibility by Specialization (%)**

		Specialization				
		Mental health (N=23)	Sexual abuse/ trauma (N=38)	School counsellor (N=15)	Family, couples & relationship (N=36)	Other (N=37)
Victim Responsibility	Not Responsible	39.1	47.4	20.0	36.1	35.1
	Responsible	60.9	52.6	80.0	63.9	64.9
	<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
Victim Credibility	Not Credible	60.9	55.3	66.7	58.3	56.8
	Credible	39.1	44.7	33.3	41.7	43.2
	<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

*Years Experience Counselling Sexual Abuse Victims*

Table 19 shows that a greater number of counsellors with more than 5 years experience working with CSA clients view victims as responsible (73.1 percent) and credible (51.2 percent) compared to counsellors with 1 to 5 years experience (60.5 and 39.5 percent respectively) and no experience (56.9 and 36.9 percent respectively). In

particular, almost three times as many counsellors with more than 5 years experience view victims as “responsible” (N=30) compared to “not responsible” (N=11) (Table 18). This is higher than the proportion of other counsellors who have 1 to 5 years experience (1.5 times more counsellors view victims as responsible)<sup>1</sup> and no experience (1.3 times more counsellors view victim as responsible)<sup>2</sup>. Hence, counsellors with the most years of experience working with CSA clients, tend to view victims as responsible but also credible more frequently than counsellors with fewer years of experience working with this clientele.

**Table 19. Counsellors views of Victim Responsibility and Victim Credibility by Years of Experience Working with CSA Clients**

Years of Experience Counselling CSA Clients	Victim Responsibility	Victim Credibility				Total	
		Not Credible		Credible		N	%
		N	%	N	%	N	%
None	Not Responsible	15	23.1	13	20.0	28	43.1
	Responsible	26	40.0	11	16.9	37	56.9
	<b>Total</b>	<b>41</b>	<b>63.1</b>	<b>24</b>	<b>36.9</b>	<b>65</b>	<b>100.0</b>
1-5	Not Responsible	9	21.0	8	18.5	17	39.5
	Responsible	17	39.5	9	21.0	26	60.5
	<b>Total</b>	<b>26</b>	<b>60.5</b>	<b>17</b>	<b>39.5</b>	<b>43</b>	<b>100.0</b>
More than 5	Not Responsible	4	9.8	7	17.1	11	26.9
	Responsible	16	39.0	14	34.1	30	73.1
	<b>Total</b>	<b>20</b>	<b>48.0</b>	<b>21</b>	<b>51.2</b>	<b>41</b>	<b>100.0</b>

### Summary

Two thirds of counsellors (N=149) see an element of responsibility and slightly more than half see some lack of credibility in children’s disclosures of sexual abuse. When victims are viewed as responsible, those sexually abused by their biological parents are more likely to be disbelieved. There are also important gender differences.

<sup>1</sup> Percentage of the total number of counsellors who view victims as “responsible” (N=26) compared to “not responsible” (N=17). Thus, 26/17=1.5 times more counsellors view victims as responsible.

<sup>2</sup> Percentage of the total number of counsellors who view victims as “responsible” (N=37) compared to “not responsible” (N=28). Thus, 37/28=1.3 times more counsellors view victims as responsible.

More counsellors view boys as responsible than girls, and while counsellors have similar views of victim credibility when perpetrators are men and women, more counsellors view victims of female-perpetrated CSA as responsible compared to victims of male-perpetrated CSA. In addition, more counsellors view same-sex CSA victims as responsible but credible compared to opposite-sex CSA victims.

Concerning respondent characteristics, there appears to be a trend where counsellors attribute less responsibility to victims as their years of counselling experience increase and more counsellors with the fewest number of years of experience believe sexual abuse disclosures compared to most counsellors with greater years of experience. More counsellors who specialize in CSA and trauma tend not to view children as responsible and are more likely to believe abuse disclosures than counsellors who specialize in other areas. Finally, while counsellors with more years of experience working with CSA clients view victims as more credible, the results also suggested that this group also views victims as more responsible than do counsellors who do not have any experience counselling CSA victims.

A descriptive analysis has addressed the initial research questions of whether victim gender and familial relationship between perpetrators and victims influence counsellors' views of victim responsibility and credibility. This level of analysis, however, only identifies aspects of perpetrator, victim and counsellor characteristics that seem to affect counsellors' views but it does not reflect a correlation between variables, nor does it describe the direction (positive or negative) or strength (strong, moderate or weak) of the observed trends between the independent and dependent variables. For example, the descriptive statistics for "Victim Gender" suggest that more counsellors

view boys (70.7 percent) as responsible for their victimization than girls (54.1 percent) (Table 13). Yet, these statistics do not reveal anything about the strength of this association. The descriptive statistics also suggest that counsellors differ more in their views of boys as responsible (58.5 percent)<sup>3</sup> compared to girls (15 percent)<sup>4</sup> (Table 13). However, a description of the difference between the number of counsellors who view boys as “responsible” in contrast to “not responsible” does not examine whether the difference is a statistically significant one. Nor does it compare how Victim Gender varies from other independent variables in their associations with the dependent variables. Thus, Spearman’s Correlation Coefficient<sup>5</sup> ( $r_s$ ) is used to further examine the direction and strength of the potential relationship between the independent and dependent variables. A significant finding is indicated by a critical value of .05, which measures the probability that the relationship observed in the sample occurs by chance. Setting the critical value (sig.) at 0.05 means that there is a 5 in 100 probability that the relationship observed in the sample is due to chance. Also, the eta-squared coefficient ( $\eta^2$ ) is used to measure the proportion of variance in the dependent variable that is accounted for by the independent variable (George & Mallery, 2001: 109). The value of eta-squared is always positive and ranges from 0 (IV has no influence on the DV) to 1 (IV predicts DV). When multiplied by 100, eta-squared gives the percentage of variation in the dependent variable that is accounted for by the independent variable.

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<sup>3</sup> Percentage difference in the total number of respondents who view victims as “responsible” (N=53) compared to “not responsible” (N=22). Thus,  $53-22=31$ , and  $31/53=58.5\%$ .

<sup>4</sup> Percentage difference in the total number of respondents who view victims as “responsible” (N=40) compared to “not responsible” (N=34). Thus,  $40-34=6$ , and  $6/40=15\%$ .

<sup>5</sup> A correlation coefficient indicates the direction and strength of the association on a standardized scale ranging between -1 (perfect negative relationship) and +1 (perfect positive relationship), with a score of 0 indicating no association between variables (Weisburd, 1998). Given the skewed nature of my data, this non-parametric alternative to Pearson’s r-correlation is argued by Weisburd (1998) to be a more appropriate strength of association test when data are not normally distributed.

Table 20 shows two significant relationships. First, there is a moderate negative association between victim gender and counsellors' views of victim responsibility [ $r_s = -0.139$ ,  $p = .046$ ]. This suggests that boys are associated with views of greater responsibility for their victimization than are girls. Also, the eta-squared coefficient indicates that victim gender accounts for 2.9 percent of the variance observed in counsellors' views of victim responsibility. This means that although boys are viewed as more responsible than girls, victim gender does not have a large effect on counsellors' attributions of victim responsibility. Second, there is a moderate negative association between years of counselling experience and victim credibility [ $r_s = -0.147$ ,  $p = .037$ ]. This suggests that counsellors with fewer years of experience view victims as more believable in their disclosure of abuse than counsellors with greater years of experience. Also, the eta-squared coefficient indicates that years of counselling experience accounts for 15.2 percent of the variance observed in counsellors' views of victim credibility. Thus, although similar correlation coefficients were found for both of these associations (in terms of strength and direction), the eta-squared value informs us that years of counselling experience is more influential and carries more weight in affecting change in counsellors' views of victim credibility than does victim gender in affecting change in counsellors' views of victim responsibility.

**Table 20. Spearman's correlation ( $r_s$ ) and eta-squared ( $\eta^2$ ) coefficients describing associations between the independent and dependent variables.**

Independent Variables <sup>6</sup>	Dependent Variables					
	Victim Responsibility			Victim Credibility		
	$r_s$	Sig.	$\eta^2$	$r_s$	Sig.	$\eta^2$
Perpetrator-victim relationship			.007			.010
Biological Parent	-.052	.266		-.129	.058	
Step-parent	.052	.266		.067	.208	
Teacher	.006	.470		.062	.227	
Victim Gender	-.139	.046*	.029	.041	.311	.001
Perpetrator Gender	.092	.133	.011	-.066	.213	.000
Type of CSA	.053	.053	.005	.127	.061	.014
Counsellor Gender	-.110	.092	.000	.069	.201	.002
Years of Counselling Experience	-.050	.272	.175	-.147	.037*	.152
Specialization			.025			.005
Mental Health	.008	.463		-.036	.331	
Sexual Abuse/Trauma	-.128	.060		.078	.172	
School Counsellor	.027	.372		-.103	.106	
Family, Couples and Relationships	-.013	.440		-.009	.459	
Other	.123	.068		.032	.350	
Years of Experience Working With CSA clients	.038	.324	.118	.062	.226	.167

\*Correlation is significant at the 0.05 level

Although significant relationships are shown to exist, Spearman's correlation is not a test of population parameters, nor is eta-squared. These tests do not address whether the relationships observed in the sample (including measure of variability) between the independent and dependent variables, can be generalized to exist in the larger population of counsellors from where the sample was drawn. Also, the correlation analysis does not tell us how much more boys are viewed as responsible than girls and how many more years of counselling experience occur before counsellors begin to doubt victims' disclosures of CSA.

In the next section, a logistic regression analysis is used to examine further whether these relationships exist for populations of counsellors. Moreover, a logistic

<sup>6</sup> For Spearman's correlation, the IVs must be continuous. Dummy variables were created for: perpetrator-victim relationship (0=no, 1=yes for all categories), victim gender (0=boy, 1=girl), perpetrator gender (0=male, 1=female), type of CSA (0=opposite-sex, 1=same-sex), counsellor gender (0=male, 1=female) and specialization (0=no, 1=yes for all categories). Years of counselling experience and years of experience working with CSA clients are continuous IVs measured in years.

regression analysis is also used to evaluate the predictability of independent variables individually and collectively as a model to predict counsellors' views of victim responsibility and credibility. An exploration of the predictability of the independent variables as a group reflects the reality of the test condition that respondents experienced with the vignettes. As such, a new research question emerges that addresses specifically if and how the combination of all the independent variables influence counsellors' attributions of victim responsibility and credibility and whether those attributions exist in the larger population of counsellors contacted to participate in this research (N=884). The next section addresses the following research question:

Does the combination of perpetrator-victim characteristics (including familial relationship, gender and type of sexual abuse) and counsellor characteristics (including gender, years counselling experience, specialization, and years experience counselling CSA victims) predict whether counsellors will view victims as responsible and credible better than any one of these variables alone?

### **Predicting Counsellors' Views of Victim Responsibility and Victim Credibility: Logistic Regression Analysis**

The *Statistical Package for the Social Sciences (SPSS) version 11.5 for Windows* was used to conduct a binary logistic regression analysis of counsellors' views of victim responsibility and credibility (dependent variables) predicted by a given set of predictor (independent) variables. There are eight independent variables in the regression analysis: perpetrator-victim relationship, victim, perpetrator and counsellor gender, type of sexual abuse, years of counselling experience, specialization area, and years experience counselling CSA victims.

Given that these variables are categorical and continuous, logistic regression is the most appropriate statistical analysis for the data because it accommodates a mixture of

categorical and continuous independent variables (Jaccard, 2001). The categorical predictor variables (perpetrator-victim relationship, victim, perpetrator and counsellor gender, type of sexual abuse, and specialization) and continuous predictor variables (years counselling experience and years experience counselling CSA victims) are listed in Table 21 with their corresponding values. In logistic regression, categorical predictors are identified as dummy variables because of their indicator coding. This coding assigns values of “1” to the indicator category and “0” to the reference category. The independent variables form the model (group) which is entered into the logistic regression equation to predict a certain dependent variable outcome. Table 21 also shows two dependent dichotomous outcome variables: “victim resp” and “victim cred”. These outcome variables both consist of two categories (not responsible/responsible and not credible/credible). These categories were formed by transforming “victim responsibility scores” and “victim credibility scores” into dichotomous variables based on their distribution of scores (Graphs 1 and 2) previously described on page 70.

**Table 21. Independent and dependent variables in the data set**

Variable	Description	Category Values	Name
Independent Variables	Perpetrator-victim relationship	1 = biological parents; 2 = step-parents; 3 = teachers	pv relationship
	Victim gender	0 = male; 1 = female	vgender
	Perpetrator gender	0 = male; 1 = female	pgender
	Type of sexual abuse	0 = opposite-sex CSA; 1 = same-sex CSA	csa type
	Counsellor gender	0 = male; 1 = female	cgender
	Counselling experience	(in years)	years exp
	Specialization	1 = mental health; 2 = sexual abuse/trauma; 3 = school counsellor; 4 = family, couples & relationship; 5 = Other	specialization
	Exp. counselling sexually abused clients	(in years)	years csa exp
Dependent Variables	Victim responsibility	0 = not responsible; 1 = responsible	victim resp
	Victim credibility	0 = not credible; 1 = credible	victim cred

A logistic regression analysis is also a parametric statistical test of significance. As such, it performs at a higher level of analysis compared to non-parametric tests. Because it is a test of statistical significance, logistic regression analysis can be used to examine whether differences observed in the sample are likely to exist in the broader population of counsellors who were contacted to participate in the research. Given the skewed nature of the data (Graphs 1 and 2), a logistic regression analysis is an appropriate statistical test to employ because of its relaxed data assumptions concerning homogeneity of variances, normality and linearity (Tabachnick & Fidell, 2001). There are, however, other data assumptions required by logistic regression analysis.

### Assumptions Check

#### *Multicollinearity*

Multicollinearity is said to exist when independent variables are highly correlated with each other indicated by a correlation of estimates value greater than or equal to 0.8 (Menard, 2002: 76). This is a problem because highly correlated variables can inflate the size of error terms and weaken the power of the analysis (Tabachnick & Fidell, 2001). A correlation matrix was used to evaluate the relatedness of predictor variables for this model. The results show an absence of multicollinearity among predictor variables, as no correlation coefficient exceeds .488 (Appendix K).

#### *Outliers*

Outliers present the risk that a case in one category (i.e. child is not credible) may show a high probability for being in another category (i.e. child is credible). If there are enough cases like this, the model will have a poor fit because the independent variables will be inadequate predictors of dependent variable outcomes. Multivariate outliers

among predictor variables can be found using the Mahalanobis distances test (Tabachnick & Fidell, 2001). Mahalanobis distances are evaluated as a chi-square statistic with degrees of freedom equal to the number of predictor variables, in this case eight: perpetrator-victim relationship, victim gender, perpetrator gender, type of sexual abuse, counsellor gender, years counselling experience, specialization, and years counselling CSA victims. Any case with a Mahalanobis distance greater than  $\chi^2(8) = 26.125$  where  $p=.001$ , will be an outlier. As shown in Table 22, the top ten Mahalanobis distance scores are listed, and no outliers exist among the variables in this data set.

**Table 22. Mahalanobis values for predictor variables to check for multivariate outliers**

Mahalanobis Distance	Case number	Statistic
1	60	22.853
2	85	17.591
3	69	16.945
4	9	15.964
5	97	15.676
6	57	15.557
7	109	15.498
8	25	14.838
9	101	14.273
10	3	14.115

#### *Adequacy of Expected Frequencies*

When a goodness-of-fit test is used that compares observed with expected frequencies in cells formed by combinations of categorical variables, the analysis may have little power if expected frequencies are too small (Tabachnick & Fidell, 2001). To avoid this problem, Model Goodness-Of-Fit Test criterion was selected that is not based on observed versus expected frequencies. Hence, the predictors selected for this analysis do not pose a risk of producing little power and unstable results.

## Inferential Tests

### *Model Goodness-of-fit Test*

This test asks if the predictors as a group (model) contribute to the prediction of the dependent variable, specifically, views of victims as responsible and credible. This is achieved by comparing the constant-only model with a model that has the constant plus all predictors. The constant is the intercept term and describes the value of the dependent variable when none of the predictors are related to outcome (victim is not responsible/not credible). If no improvement is found when all predictors are added to the logistic regression equation, the predictors are unrelated to outcome. The difference between the two models is reported as a chi-square statistic ( $X^2$ ), and the degrees of freedom (df) is the difference in degrees of freedom for the two models (North Carolina State University, G. David Garson, <http://www2.chass.ncsu.edu/garson/PA765/logistic.htm>). Chi-square values with a significance level greater than .05 suggest that the full model is not significantly different from the constant-only model. This means that the combination of independent variables in the full model do not make a difference in predicting views of victims as responsible and credible.

In addition to the chi-square statistic, a -2 log-likelihood value (-2LL) indicates how well the model fits the data. Smaller -2LL values indicate that the model fits the data better and a perfect model has a -2LL value of zero (George & Mallery, 2001).

Finally, the Cox and Snell and Nagelkerke  $R^2$  coefficients indicate the percentage of the dependent variable that is accounted for by all predictor variables in the model (George & Mallery, 2001). The Cox & Snell  $R^2$  statistic is argued by some to be difficult to interpret because its maximum range rarely reaches 1 (Pampel, 2000; Tabachnick &

Fidell, 2001; North Carolina State University, G. David Garson, <http://www2.chass.ncsu.edu/garson/PA765/logistic.htm>). The Nagelkerke  $R^2$  statistic, in contrast, is viewed as a superior measure of explained variance because it is a modification of the Cox and Snell  $R^2$  coefficient to assure that it can vary within a range of 0 to 1 (North Carolina State University, G. David Garson, <http://www2.chass.ncsu.edu/garson/PA765/logistic.htm>).

Table 23 displays the Model Goodness-of-fit results for victim responsibility and credibility using the SPSS enter method, where all predictors are entered into the logistic regression equation at the same time. The chi-square coefficients for the full models tested with both dependent variables are not significant at the critical levels. This means that the combination of independent variables tested in the full model do not predict whether counsellors view victims as responsible and credible. As such, the -2LL and Nagelkerke  $R^2$  coefficients are not to be interpreted.

**Table 23. Logistic regression coefficients for the full Model Goodness-of-fit tests**

Model	$\chi^2$	df	p	-2LL	Nagelkerke $R^2$
Full model with victim responsibility	18.384	12	.105	178.889	.158
Full model with victim credibility	12.826	12	.382	189.518	.111

Full model includes predictors: pv relationship, vgender, pgender, csa type, cgender, years exp, specialization, years csa exp.

Although the Model Goodness-of-fit test assesses the overall logistic model, it does not tell us if particular independent variables are better than others in predicting a certain outcome. In addition to the goodness-of-fit test, the Wald statistic can be used to report on the individual significance and contribution of predictor variables to counsellors' attributions of victim responsibility and credibility.

*Wald Statistic*

The Wald statistic ( $z$ ) evaluates the contribution of individual predictors in calculating a certain outcome (Tabachnick & Fidell, 2001). Wald values, in combination with degrees of freedom ( $df$ ) and a significance level smaller than or equal to .05, indicate significance (George & Mallery, 2001). A significant result indicates a predictor that is reliably associated with outcome and requires further interpretation to understand its effect on the dependent variable outcome. This is accomplished by examining the logistic coefficient ( $B$ ).

The logistic regression coefficient ( $B$ ) is expressed in terms of logged odds and indicates the effect of predictors on outcome (George & Mallery, 2001). The positive/negative sign in front of the coefficient indicates whether the predictor has a positive or negative effect on the outcome, and the standard error (S.E.) is a measure of its dispersion (George & Mallery, 2001). Many authors argue that the interpretation of the logistic coefficient lacks a meaningful unit of measurement (Demaris, 1992; Pampel, 2000; Jaccard, 2001; Tabachnick & Fidell, 2001; Agresti, 2002; Menard, 2002). For instance, a statement about the effects of variables on changes in logged odds reveal little about the relationship and does little to help explain the results. As such, the exponentiated logistic coefficient ( $\text{Exp}(B)$ ) is often used to help interpret the effect of predictors on outcome in terms of odds (Pampel, 2000). An  $\text{Exp}(B)$  coefficient of 1 indicates that the variable has no effect (Pampel, 2000: 21). Values greater than 1 represent increases in odds and values smaller than 1 represent decreases in odds (Pampel, 2000). This interpretation of greater/less than 1 is the same information that is interpreted from the positive/negative signs of the  $B$  coefficient. A  $B$  coefficient with a

negative sign will always have an  $\text{Exp}(B)$  coefficient below 1, meaning that the variable reduces the odds of observing a particular outcome. A  $B$  coefficient with a positive sign will always have an  $\text{Exp}(B)$  coefficient above 1, indicating that the variable increases the odds. Moreover, the more distant the  $\text{Exp}(B)$  coefficient is from 1 in either direction, the greater the effect in changing the odds (Pampel, 2000). Therefore, the *difference* of an  $\text{Exp}(B)$  coefficient from 1 indicates the effect size in terms of an increase or decrease in the odds for a unit change in the independent variable. Furthermore, the  $\text{Exp}(B)$  coefficient minus 1 and times 100 gives the percentage increase or decrease due to a one-unit change in the independent variable (Pampel, 2000). For dummy variables, a change in one unit compares the indicator category (“1” values) to the reference category (“0” values) (Pampel, 2000). For example, in Table 19 the independent variable “Victim Gender” has two categories: male, coded with value “0” and female, coded with value “1”. The term “unit change” refers to a change in the value of the independent variable. For continuous independent variables unit changes are sometimes expressed in years, minutes, degrees, etc. A researcher may find that a 1-year increase or decrease predicts a certain outcome. But for a dummy variable such as “Victim Gender”, it does not make sense to express a one-unit change as: becoming more female predicts a certain outcome. Therefore, a one-unit change for dummy variables directly compares the indicator category (girl victims) with the reference category (boy victims). Here a researcher may express a one-unit change as: girl victims predict a certain outcome and boy victims do not.

Tables 24 and 25, display the results for individual predictors in determining counsellors’ views of victim responsibility and credibility respectively. Beginning with

Table 24, the findings show a single significant result for victim gender indicated by the Wald statistic and its significance level ( $z=5.78$ ,  $df=1$ ,  $p=.16$ ). This means that Victim Gender differs significantly from zero and is reliably associated with predicting counsellors' views of victims as responsible. All other predictors are not significant at the critical level ( $p<.05$ ) and do not contribute towards predicting counsellors' views of responsibility. The B coefficient ( $-.903$ ) suggests that Victim Gender has a negative effect on the outcome (Table 24). In particular, the logged odds of viewing victims as responsible are .90 lower for girls than boys confirming that boys are viewed as more responsible for their victimization than girls. However, since the B coefficient lacks a meaningful metric, the Exp(B) coefficient is used to help interpret the effect of victim gender on counsellors' views of victim responsibility.

The Exp(B) coefficient (.405) is used to compare the odds of viewing victims as responsible (Table 24). The comparison involves girls relative to boys and shows that the odds are 59.5 percent lower for girls to be viewed as responsible compared to boys.<sup>7</sup> The Exp(B) coefficient also represents the odds ratio of girl to boy victims. The odds of viewing girls as responsible as a ratio to the odds for boys is the Exp(B) coefficient (.405) (Table 24). This means that about 40 girls are viewed as responsible per 100 boys.

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<sup>7</sup> Odds =  $(\text{Exp}(B)-1)(100)$ . Exp(B) for vgender = .405. Thus, odds =  $(.405-1)(100) = 59.5\%$

**Table 24. Logistic regression coefficients for individual predictors (DV = Victim Responsibility)**

Predictor Variables	B	S.E.	Wald	df	Sig.	Exp(B)
PV RLTSHP						
Biological parents	-.480	.445	1.163	1	.281	.619
Step-parents	-.148	.455	.106	1	.745	.862
Teachers			1.219	2	.544	
VICGEN						
Girls	-.903	.375	5.789	1	.016*	.405
PERPGEN						
Female	.698	.383	3.330	1	.068	2.010
CSA TYPE						
Same-sex	.149	.372	.159	1	.690	1.160
COUNSGEN						
Female	-.140	.495	.080	1	.778	.869
YRS EXP	-.045	.030	2.212	1	.137	.956
SPECIAL						
Mental health	-.321	.593	.294	1	.588	.725
Sexual abuse/trauma	-.955	.546	3.058	1	.080	.385
School counsellor	.464	.793	.342	1	.558	1.590
Family, couples & relationship	-.141	.550	.066	1	.798	.868
Other			5.100	4	.277	
YRS CSA EXP	.069	.037	3.425	1	.064	1.071
Constant	1.376	.754	3.331	1	.068	3.959

**Table 25. Logistic regression coefficients for individual predictors (DV = Victim Credibility)**

Predictor Variables	B	S.E.	Wald	df	Sig.	Exp(B)
PV RLTSHP						
Biological Parents	-.469	.434	1.170	1	.279	.626
Step-parents	.051	.428	.014	1	.905	1.052
Teachers			1.708	2	.426	
VICGEN						
Girl	.167	.357	.220	1	.639	1.182
PERPGEN						
Female	-.157	.362	.188	1	.665	.855
CSA TYPE						
Same-sex	.429	.358	1.437	1	.231	1.536
COUNSGEN						
Female	-.392	.460	.725	1	.394	.676
YRS EXP	-.082	.033	6.375	1	.012*	.921
SPECIAL						
Mental health	.010	.577	.000	1	.986	1.010
Sexual abuse/trauma	.131	.519	.064	1	.801	1.140
School counsellor	-.690	.693	.990	1	.320	.502
Family, couples & relationship	-.005	.533	.000	1	.993	.995
Other			1.555	4	.817	
YRS CSA EXP	.078	.036	4.629	1	.031*	1.081
Constant	.425	.686	.384	1	.535	1.530

\*p &lt; .05

Table 25 examines the model for views of victim credibility and illustrates two significant findings as indicated by the Wald statistic and its significance level: years of counselling experience ( $z=6.375$ ,  $df=1$ ,  $p=.012$ ) and working with CSA clients ( $z=4.629$ ,  $df=1$ ,  $p=.031$ ). These two variables both significantly differ from zero and are reliably associated with predicting counsellors' views of victims as credible. All other predictors are not significant at the critical level ( $p<.05$ ) and do not contribute towards the prediction of the victim as credible. Interestingly, the B coefficients for years of counselling experience ( $-.082$ ) and working with CSA clients ( $.078$ ) suggest opposite effects on predicting victim credibility (Table 25). Specifically, the coefficients show that while a 1-year increase in counselling experience lowers the logged odds of viewing victims as credible by  $.082$ , a 1-year increase in working with CSA clients raises the logged odds of viewing victims as credible by  $.078$  (Table 25). The interpretation of the  $\text{Exp}(B)$  coefficients indicate that a 1-year increase in counselling experience reduces the odds of viewing victims as credible by 7.9 percent, while a 1-year increase in working with CSA clients raises the odds by 8.1 percent.<sup>8</sup> At first glance, these findings suggest similarities between effect strength for these two variables on the outcome of believing children's allegations of abuse. However, although both counselling experience and working with CSA clients are measured in years, the ranges and standard deviations of the two variables differ (Table 7).

To make the coefficients more comparable, it helps to calculate the percentage change in odds for a one standard deviation change. This is achieved by multiplying the standard deviation by the logistic regression coefficient (B), and then finding the

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<sup>8</sup> Odds =  $(\text{Exp}(B)-1)(100)$ .  $\text{Exp}(B)$  for years  $\text{exp}=.921$  Thus,  $\text{odds}=(.921-1)(100)=7.9\%$ .  $\text{Exp}(B)$  for years  $\text{csa exp}=1.081$ . Thus,  $\text{odds}=(1.081-1)(100)=8.1\%$ .

exponential of the product (Pampel, 2000). The percentage change in the odds is calculated with this new coefficient in the same way as previously done with victim gender using the  $\text{Exp}(B)$  coefficient. For counselling experience, the resulting coefficient of .527 shows that a standard deviation unit increase in counselling experience reduces the odds of viewing the victim as credible by 47.3 percent.<sup>9</sup> For working with CSA clients, the resulting coefficient of 1.686 means that a standard deviation unit increase in counselling CSA clients increases the odds of viewing the victim as credible by 68.6 percent.<sup>10</sup> These findings suggest that the two variables still have opposite effects, but also, that experience working with CSA clients has a stronger effect on predicting views of children as credible. As such, counsellors with greater years of experience who do not work with CSA clients are more likely to view children as not credible in their disclosures of abuse than are counsellors with greater years of experience who work with this particular clientele.

### Summary

These findings suggest that counsellors view boys as more responsible for their victimization than girls and counsellors with more years of experience are more likely to disbelieve victims' disclosures of abuse than counsellors with fewer years of experience. But, when counsellors have experience working with CSA clients, they view victims as more credible than counsellors who lack such experience. Furthermore, the statistical significance observed for victim gender, years of counselling experience and working

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<sup>9</sup> Percentage change in the odds= $[(\text{sd}*(B)e^x) - 1](100)$ . Thus, for years exp= $[(7.8*(-.082)e^x) - 1](100)=[(.527)-1](100)=47.3\%$ .

<sup>10</sup> Percentage change in the odds= $[(\text{sd}*(B)e^x) - 1](100)$ . Thus, for years csa exp= $[(6.7*(.078)e^x) - 1](100)=[(1.686)-1](100)=68.6\%$ .

with CSA clients means that these differences are not due to chance and therefore can be generalized to the larger population of 884 counsellors contacted to participate in the research. As such, it is also important to recognize that the predictors for which a significant result was not found cannot be generalized to the larger population of counsellors. This does not mean that the findings are inaccurate; only that there is no method for detailing their accuracy relative to the larger population. Thus, these findings can only be considered within the specific context of the sample.

## CHAPTER 6: CONCLUDING REMARKS: MAKING SENSE OF THE DATA

In this chapter, I discuss the thesis findings in relation to prior research on perceptions of CSA and incest victims. I begin by examining counsellors' comments on victim responsibility and credibility and although it is important to recognize that my research is exploratory and does not test a particular theory, my findings do relate to critical youth works by Bell (1995), Eder (1997) and Heilman (1998) in such a way that supports a revised view of patriarchy that is more in line with the intersectional feminist literature. Next, I explore how the statistical findings of significance from the logistic regression analysis fit with prior research on perceptions of CSA and incest victims. This is followed by a discussion of the contributions and limitations of my research, including directions for future research in the area of CSA victims. My closing remarks consist of a summary of my research and a short discussion about why I chose this area to research, and how it has broadened my perspective and added to my knowledge of various ways of conducting social research.

### **In Their Own Words: Counsellors' Comments on Victim Responsibility and Credibility**

A unique feature of this research, compared to other vignette designs, is that in addition to quantitative methods and analyses, the inclusion of open-ended discussion questions added a qualitative dimension that provided respondents with an opportunity to offer explanations about why they answered the survey-questionnaire the way they did and to comment on the vignettes. Respondents' answers to these questions offered further

insight into how counsellors define and understand victim responsibility and victim credibility.

Interestingly, respondents talked most about specific reasons for defining the situation described in the vignettes as CSA. These reasons include: the occurrence of inappropriate sexual touching; the child tells the adult to stop; the adult forces the child to secrecy; and, because the child is 12 years old and therefore a minor, the actions described in the vignettes also represent a criminal code violation to many respondents. The most common elaboration among respondents is that the incident of sexual abuse described in the vignettes portrays boundary violations on many levels, including: violations of trust between parent and child, and teacher and student; violations of power as an adult over a child; abuse of authority by teachers over students; violations of parental responsibilities; violations of personal rights; and the existence of power imbalances between adults and children. Such views of CSA as more than the physical acts of abuse reflect the broader interpretations of the kinds of behaviours constituting CSA that are held by feminists such as Bass and Davis (1988), Engel (1989) and Blume (1990). This suggests that contemporary counsellors have different and broader definitions of CSA than reported in the earlier psychological literature.

Some respondents questioned certain aspects of the vignettes and specific survey questions in ways that led me to consider the possibility that some respondents viewed the children described in the vignettes as more responsible than other children. For instance, one question in the survey designed to assess victim responsibility: *If the child were older, they could have stopped what happened with the adult*, elicited responses from some who insisted that no matter how old the child was she/he is not the one with

power, and as such, is in no way responsible for her/his own victimization. However, other respondents wished for me to elaborate further on this question and provide a specific older age. Some respondents wrote:

Sexual abuse is an abuse of power and control. Rachel [child] was obviously at the mercy of a stronger adult both physically and emotionally. In item #2, the only reason why I didn't respond "strongly disagree", is because, as she gets older there is a possibility that she may learn to not have been at the same psychological disadvantage with respect to her father. Older is a comparative term. [Male respondent, father-daughter]

Age may have allowed Rachel [child] to get away because she would be physically stronger and possibly have more education/knowledge about abuse through school. [Female respondent, stepmother-stepdaughter]

This child was overpowered both emotionally and physically. Were the child older and at a different developmental stage such that she had more personal awareness plus less of a power differential existed, she would be in a much better position to "shut-down" her aggressor. [Female respondent, female teacher-female student]

The second question regarding "if Robert [child] were older could he have stopped Cathy? [adult] What age 17, 18 or 13? Regardless of his age Cathy would have been violating his rights. [Female respondent, stepmother-stepson]

These comments suggest that for some respondents, victim age has the potential to play an important role in defining responsibility for sexual abuse. These views reflect arguments made by critical youth researchers, such as Bell (1995) and Eder (1997), who examine how age empowers adults over children in a school and home environment.

Although counsellors do not explicitly state that children older than 12 (the age of victims described in the vignettes) should be more capable of stopping the abuse, their questioning of this variable suggests that there is variability among some counsellors views compared to others who expressed that children are *never* responsible regardless of their age. As such, this finding lends support to other research on victim age as influential in eliciting different views of CSA victims among clinicians (Kendall-Tackett & Watson, 1991) and research with undergraduate students (Waterman & Foss-Goodman, 1984; Broussard & Wagner, 1988; Maynard & Wiederman, 1997). Literature on critical youth

studies problematizes age as a factor that empowers adults (or older youth) over children (Eder, 1997; Heilman, 1998). Counsellors' comments about victim age suggest that future research addressing whether different victim ages influence views of responsibility and credibility could be useful in obtaining a more detailed understanding of counsellors' views of CSA and the complexity of victim-perpetrator relationships.

Despite many respondents' assertions that victims are not responsible, some elaborated on how and why sexual abuse occurs by focusing on victim characteristics and implied that children are responsible when they aid in the occurrence of sexual abuse:

My understanding of child sexual abuse which informs me that an adult in a position of trust with any child has power they can abuse, as Keith [adult] did. Rachel [child] was unaware of what was happening to her, possibly because of the poor sexual awareness education she has received. I am also aware that when attention is given to children who may be needy, they sometimes respond in ways that may be inappropriate, but they do not understand that. Rachel was sexually abused by Keith and a culture of silence was created around this first act. This opens Rachel to further abuse...Rachel may have been a very vulnerable child. There are many aspects of this story that need to be explored when trying to understand it fully. [Female respondent, stepfather-stepdaughter]

Rachel [child] was probably "chosen"—possibly her previous behaviour in class had shown her to be acquiescent to authority figures; to be compliant; not assert self strongly—i.e. yelling NO, telling her parents. [Female respondent, female teacher-female student. The vignette states: *At this point Rachel felt uncomfortable and told Cathy to stop.*]

I believe the boy had more power to effect the situation than he suspected. The counselling he receives should involve empowering, learning to recognize how much one has in a situation and how it can be appropriately utilized. [Female respondent, male teacher-male student]

Interestingly not one respondent out of the 149 sampled speculated about perpetrator characteristics that would enable him or her to sexually abuse children. One respondent comments that the perpetrator requires psychological attention but, at the same time, she sees the child as responsible:

A 12 year old girl will be impressed by the interest her male teacher has in her. I think that professor Keith [adult] truly went beyond ethical conduct as a professional and as an adult. He should also be treated for sexual disorder. As for Rachel [child], I hear her as being trustworthy. As she relates the event, she admits that "rubbing her shoulders" was a

good feeling... she let herself be seduced by this adult who is her teacher and if she is staying after class to help the teacher with streamers, I see this as an indication that she has great admiration for this person that she is helping. [Female respondent, male teacher-female student]

This comment implies a certain amount of victim responsibility when the counsellor problematizes victim behaviour by claiming that the girl victim “let herself be seduced by this adult”. This kind of language suggests that the child has some amount of power and control over the abusive situation that could lead to her stopping herself from being seduced by her teacher.

### **What Does it all Mean?**

#### Who’s Responsible and Who’s Believable?: A Discussion of the Logistic Regression Findings

In addition to the descriptive sample statistics, I used a logistic regression analysis to examine whether counsellors’ views of victim responsibility and credibility could be predicted from a set of perpetrator-victim and counsellor characteristics and whether the relationships between the variables observed in my sample could be generalized to populations of counsellors. The analysis revealed three variables as significant predictors of counsellors’ views of victim responsibility (victim gender) and victim credibility (years of counselling experience and years of experience working with CSA clients).

#### *Counsellors View Boys as More Responsible Than Girls*

Findings from the logistic regression analysis suggest that counsellors view boys as more responsible than girls for their victimization. Furthermore, the data also provides an idea of how much more responsible counsellors view boys to be compared to girls. The data suggests that the odds of viewing boys as more responsible than girls are 2.5

times greater. In other words, for every 40 girls who are viewed as responsible, counsellors view 100 boys as responsible. This finding is consistent with prior research where greater attributions of responsibility were associated with boy, rather than girl, victims of incest (Jackson & Ferguson, 1983) and CSA (Finkelhor & Redfield, 1984; Waterman & Foss-Goodman, 1984; Broussard & Wagner, 1988). The theoretical interpretations of this finding are about boys as victims and it is important that these findings do not fit with early feminist theories of patriarchy where, men (including boys) are assumed powerful and oppressors relative to women (including girls), who are powerless and subordinate. Rather, this finding suggests two things. First, we need explanations that can account for boys who, because of their gender, have the power to oppress and exercise privilege over women and girls, while at the same time can be vulnerable and disempowered in relation to sexual perpetrators. Or, how boys can be both a member of the “dominant” sex and yet, also be oppressed. Secondly, an explanation is required that explicates how other factors (besides sex) mediate relationships of patriarchal power. It is also important that girls were not viewed as more responsible than boys. This implies that contemporary counsellors may have also abandoned earlier patriarchal views of girls as seductive or “participant victims” as discussed in the early psychological literature. This too suggests that patriarchal theory also cannot account on its own for counsellors’ views of girl CSA victims.

#### *Greater Number of Years Working with CSA Clients & Victim Credibility*

The logistic regression analysis found that both independent variables: (i) years of counselling experience and (ii) years of experience working with CSA clients, reliably predict counsellors’ views of victim credibility. The analysis also indicates that years of

working with CSA clients is a stronger predictor influencing counsellors' views of victim credibility than years of counselling experience. This suggests that counsellors with greater years of experience who do not work with CSA clients are more likely to view children as not credible in their disclosures of sexual abuse than are counsellors with greater years of experience who work with this particular clientele. This means that counsellors who do work with CSA clients over many years are more likely to believe children's disclosures of sexual abuse than counsellors with: (i) fewer years of experience working with CSA clients and (ii) greater years of general experience as a counsellor. These findings are consistent with prior research findings that professionals (including judges, police officers, mental health clinicians and child protection service workers) who handled a higher number of CSA cases in one year were less likely to view children as lying about their disclosures of sexual abuse (Everson, Boat, Bourg & Robertson, 1996). This suggests that views of victims as liars are a consequence of counsellors' lack of relative experience working with this particular clientele. The practical implication suggested by this finding is that CSA victims would be better suited to seek counselling with professionals who have many years of experience working specifically with CSA victims.

The theoretical implication related to these findings is that counsellors with fewer years of experience working with CSA clients, and experienced counsellors who do not treat CSA clients, both display oppressive attitudes toward victims that are not shared by counsellors with greater years of experience working with this clientele. This suggests that oppressive views of CSA victims are mediated by greater exposure to CSA cases and may not originate from within the counselling profession, but rather from the

preconceived notions of relatively inexperienced counsellors. This also raises questions about training and curriculum in professional schools. And future research also needs to problematize the race and age of counsellors as intersecting factors that mediate views of victim credibility. In this regard, some respondents commented that it is just as important to explore counsellors' views of victims who do not specialize in sexual abuse and trauma as it is for those who do. As expressed by one respondent, CSA has the unfortunate potential to act as a catalyst from which subsequent issues emerge:

I work with addictions clients and the majority of them have some trauma in their past, many times sexual abuse. I am answering this in the way that I am because of my experience as a counsellor. [Male respondent, mother-daughter]

This respondent's comment suggests that counsellors may not always be aware that they are working with a child or adult who has been sexually abused in their past. As such, there is a rationale for continued examination of views held by all counsellors and not only for those who have experience working with CSA victims. Another respondent raises a similar issue that, in addition to counsellors not knowing about their clients' history of sexual abuse; counsellors must also consider that children themselves are not always aware that they have been sexually abused:

I answered that I had not counselled children who had been sexually abused, but the fact is I do not know. I have worked with children that I think may have been abused but they have not admitted it to me, OR, they have not known that what has happened IS abuse. This is very difficult, because one does not want to LEAD the child in any way that would jeopardize a court case. I try to build a trust through play that will help them feel safe enough to reveal it, but there's no guarantees, and it can take years before a child will admit this. [Female respondent, stepfather-stepson]

The logistic regression findings further elaborate on the issue of counsellor awareness raised by these two respondents. The statistics are able to specify which kinds of counsellors are more inclined to view children as not truthful in their disclosures of sexual abuse, and thus provide an "identity" for the kinds of counsellors discussed by the

two respondents. The respondents' comments suggest that counsellors, who are not aware of their clients' histories of sexual abuse, also do not work specifically with CSA victims. This information, when combined with a statistical analysis, suggests that counsellors' lack of awareness about a client's history of abuse is associated with: (i) more years of counselling experience, and (ii) fewer years of experience working with CSA clients. Thus, the statistics provide more information to interpret respondents' comments about practical challenges related to counselling CSA victims. Moreover, respondents' comments enrich the statistical findings by raising the issue of counsellor awareness. This research illustrates how a combination of quantitative and qualitative methods can work together to gather data and "speak to each other" about ways of making sense of the data that are more enriching than data obtained by either approach alone. As such, this finding further supports research on the compatibility of quantitative and qualitative methods rather than perspectives of the two as diametrically opposed and of little use to each other (Brannen, 2005). Further discussion of methodological and theoretical contributions made by this research, including practical contributions concerning opportunities for greater experience working with CSA clients and clinician training are explored in the following section.

## **Research Contributions, Limitations & Directions for Future Research**

### **Research Contributions**

The use of a logistic regression analysis for this data supports and expands the research of other, such as Thrane (2005), who argues that the use of logistic regression can be expressed in clear and uncomplicated ways to conduct research outside of the medical sciences. Similarly, the use of vignettes to emulate experimental research in

contexts where experiments are not possible lends support to other early feminist quantitative research of the 1980s who were among the first to combine a feminist perspective with quantitative methods (Blumstein & Schwartz, 1983; Diana Russell, 1984; Reskin & Hartmann, 1986; Sprague & Zimmerman, 1989). This thesis also contributes to feminist understandings of the different ways that the literature portrays CSA and incest victims. My research suggests that patriarchal views of understanding girls and boys as victims are limited to male perpetrator and female victim pairings. In order to make sense of my research finding that boys are viewed as more responsible than girls, I interpreted my findings using intersectional feminist works, literature on masculinities, and critical youth studies. My findings suggest that an expanded version of power relations in a patriarchal social structure is needed to interpret the reality of CSA victims which is that, sometimes boys are victims and women and girls are perpetrators.

Finally, this thesis makes practical contributions to the counselling profession by supporting and expanding the research of others who argue that bias in counsellors' attitudes toward their clients, impacts negatively on counselling efficacy and outcome (Parisien & Long, 1994; Campbell & Carlson, 1995; Enns, 2000). Moreover, this thesis supports early feminist research by DeYoung (1981) and more contemporary works by Enns (1995, 2000) who argue that, clinicians' views of adult CSA victims can be oppressive when children's disclosures of sexual abuse are not believed, and thus, effectively contribute to their victimization. Thus, my findings suggest practical counselling implications regarding the need for greater experience working with CSA clients for counsellors who specialize in sexual abuse and trauma. Counsellors who specialize in other areas should also consider developing treatment approaches and other

counselling skills best suited to work with CSA clients because counsellors are not always aware of their client's abuse history. Furthermore, this thesis lends support to other research recommendations urging that counsellors be sensitized to possible sources of bias in their judgements to avoid contributing to their clients' victimization (Kendall-Tackett & Watson, 1991). Finally, based on Denov's (2001) research on clinicians' lack of psychiatric training and university courses offered on different treatment models for victims of female perpetrated CSA, and based on the thesis findings that counsellors view boys as more responsible than girls, greater inclusion of clinician training and education should consider incorporating different treatment models that address boys victimized by men and victims of female-perpetrated CSA.

#### Research Limitations and Future Research

Although the prediction of counsellors' attributions of victim responsibility and credibility based on the relationships between perpetrator-victim characteristics and counsellor traits are interesting, some caution should be attached to the inferences mentioned because of the small sample size and limitations in the design of the study. The individuals who participated in the thesis research are all members of a national counselling organization. As such, they represent a unique set of clinicians which, limits the ability to generalize the results to private enterprise. Future studies could improve upon this research by recruiting a larger and more heterogeneous group of participants.

Another research limitation involves participant recruitment methods. Because counsellors were invited to participate in this research from an online membership directory, those counsellors not listed did not have the option of being selected to

participate. Furthermore, most of the counsellors listed on the membership directory were women, which, consequently, led to a sample of unequal gender groups. Although Goodness-of-fit test criterion were selected to account for this limitation (chapter 5, p.87), such a small number of male respondents (N=28) compared to female respondents (N=121) limits the comparability and reliability of findings where male and female counsellors' views of CSA victims differ. Accordingly, future research would benefit from sampling an equal number of clinicians to allow for more reliable comparisons between and within male and female counsellors' views of CSA victims. Furthermore, other counsellor characteristics not considered in my research, such as marital status and whether they have children, would examine whether counsellors' personal characteristics influence their views of victim responsibility and credibility differently than their professional characteristics examined by this research.

Comments expressed by counsellors in the open-ended discussion questions lead me to consider alternate explanations for their attributions of victim credibility. For instance, some counsellors' comments suggest that they required more information about the victim described in the vignette before they could be certain of their views toward victim credibility:

It's true of children to make stories up, but it is always better to err on the side of the child until you find out more details. [Female respondent, mother-daughter]

The credibility of Rachel's [child] story would depend on her own history of reporting such stories to others. I have had cases of similar reports that were more indicative of the child's issues than actual abuse events. It is important to determine the credibility of the child who is making the report, but all such reports must be investigated. [Male respondent, female teacher-female student]

I don't believe Robert [child] contributed to his being sexually abused—the behaviour was instigated by his mother. I would have to discuss further how he feels about the incident and his mother before I decided for sure if any/how much exaggeration is involved and the extent and nature of the trauma suffered. I think that males would have to have some huge going on before they easily disclose sexual abuse—it would take a lot

more talking with him to get more information. The vignette does not give any previous information (is this a new client? Have we been circling the abuse without getting there for a while and now we are at the core of issues? What else is going on for him?). [Female respondent, mother-son]

This suggests perhaps that the vignette-survey methodology used to address attitudes of victim responsibility and credibility was not detailed enough to provide counsellors with a confident assessment of how they viewed the victim. Or perhaps it was too structured and rigid thereby preventing respondents from effectively communicating their views. Barter and Renold (2000) maintain that the pre-structured response categories of surveys as measures of attitudes is a major limitation. However, the survey questionnaires used in this thesis research incorporated a qualitative feature providing participants with the opportunity to comment on the vignettes and the survey in a less restrictive manner. This technique is argued by Finch (1987), to overcome some of the restrictive qualities of survey methodologies. As such, the survey limitation in my research is countered by including a qualitative feature.

Other potential viable areas of research emerged from counsellors' comments about the vignettes describing women as perpetrators, and incidents of same-sex CSA because of the rarity of such CSA cases reported, encountered and discussed:

Sexual abuse by females is greatly underestimated and goes unnoticed on many occasions. [Male respondent, mother-daughter]

I find it interesting that you used an example of incest from a same sex parent, in particular a mother. This is quite the opposite of the facts around sexual abuse that I am familiar with. That is that girls are most often sexually abused by fathers, with fathers sexually abusing boys as the second most frequent case of sexual abuse. I'd be interested in your reasons for using this vignette. [Female respondent, mother-daughter]

I have a history of working with survivors of sexual abuse and the story is not unusual except that this is mother daughter sexual abuse which is not that common but does occur. The same standards of treatment/reaction to stories of childhood sexual abuse should apply no matter what the gender of the child/adult is. [Male respondent, mother-daughter]

It is a great vignette, there is no mention of the age of the step mother... regardless there is no excuse for the behaviour and it is a possible scenario. It challenges one's perceptions of same sex and pedophile behaviors... an opportunity to know the difference. [Female respondent, stepmother-stepdaughter]

Interesting that the abuser is the child's mother. It's not often we see this in fictional vignettes or in real life counselling. It does happen, however, and I was glad to see it exemplified in this vignette. [Female respondent, mother-son]

I work with adult survivors of child sexual abuse everyday. Children are never responsible for being abused. Adults often have difficulty in situations like this also when the power differential is in place—such as it is here. This scenario is a fairly typical version of similar stories that I hear frequently from clients—however, it is curious that you have set the scenario up to have the perpetrator to be female when in the majority of situations like these the perpetrators are male. I also find it unlikely that a female teacher would physically overpower a 12-year-old boy. It is possible, but unlikely, and not typical. [Female respondent, female teacher-male student]

Because female-perpetrated CSA and same-sex CSA are reported and treated by counsellors less frequently than other types of CSA, there is a lot that is unknown about how counsellors view sexual abuse, and its perpetrators and victims when it comes to women sexual offenders and same-sex CSA. Surprisingly, Denov's (2004) research on how police officers and psychiatrists portray and explain cases involving female sex offenders reveals that psychiatric training initiatives focus exclusively on sexual assault committed by male perpetrators against female victims:

No. I never learned about female sex offenders... I talked to my daughter who just finished her psychiatric training and got her degree a year ago. I asked her if she learned about women. She said no. She learned no more than I did apparently!... They are not teaching this stuff in schools... So women are still a bit of a mystery (M-Psychiatrist2) (p. 311).

Thus, a suggestion for future research, would address the need for counselling professionals to receive training that is free from gender bias concerning perpetrators and victims of sexual assaults. As Denov's (2004) research on female sex offenders suggests, there is a need for further examination of how "power" is recognized and defined between perpetrators and victims of sexual violence. Similarly, in my research, the idea of boys as victims raises the issue of perpetrator power that stretches beyond physical

power. It is possible for a 12-year-old child to be physically stronger than his female perpetrator, but nonetheless, he may still be victimized by her. In order to better comprehend CSA, theory must go beyond the limits of power defined as physical force. Perhaps the grooming and seducing of children (and possibly adolescents) plays a more prominent role in CSA than the use of physical force. Because physical force is most commonly associated with male perpetrators, it is possible that women sex offenders are not perceived as powerful because they are less likely to use physical force and more likely to use other kinds of “force” including oppressive language or behaviour to lure and manipulate potential victims, which is not widely recognized as exerting “power” over victims. Thus, an examination of perpetrators who groom and sexually seduce children compared to those who use physical force, questions whether men and women sexual perpetrators use different tactics in their efforts to sexually exploit children. This direction of future research is related to relations of power in a sociological sense because there may be an association between the techniques adult perpetrators use to lure and sexually abuse children and gender-role expectations for male and female behaviour. For instance, perhaps male sexual perpetrators sexually abuse children in more violent and aggressive ways than women because of gender-role expectations for men to exhibit physical strength and brute force. Whereas, relative to men, women sexual perpetrators are not expected to display such overt aggressive and violent behaviour and as such, may resort to ways of sexually abusing children that are aligned with expectations of female behaviour (i.e. not aggressive and focused on physical force).

### **Concluding Remarks**

This thesis explored whether perpetrator-victim characteristics (gender, relationship, and type of CSA) and counsellor characteristics (gender, years of experience, specialization and years of experience working with CSA clients) mediated counsellors' views of victims; and examined which, if any, of these characteristics predict counsellors' attributions of victim responsibility and credibility. It is important to recognize that my research is exploratory and does not test a particular theory. Furthermore, the research questions guiding my research emerged from the literature about counsellors' views of CSA victims based on gender, and was used for the purpose of exploring further whether perpetrator-victim relationships impact counsellors' views of victim responsibility and credibility. This research is not about why counsellors view child victims the way that they do. Nonetheless, my findings do relate to the feminist literature in such a way that supports a revised view of patriarchy that is more in line with the intersectional feminist literature.

The use of feminist works on CSA aided in the interpretation of the primary literature by describing different ways that power is viewed and intersected (by factors such as race and age) within different perpetrator-victim gender pairings. Also, the intersectional feminist literature and research on masculinities also helped with the interpretation of my research findings by suggesting that a broader view of patriarchal power is needed to address the reality of boys as CSA victims.

A review of the early literature on CSA and incest suggested that victim gender influences different views of girls and boys among counselling professionals. Girl victims were portrayed as "seductive" and "participant victims" to support attributions of victim

responsibility, while boys were not. Similar portrayals of girls as initiating and desiring sexual relationships with men appear in more recent literature where girls are talked about as responsible for their victimization evidenced by displays of “passive resistance”. Girls are also portrayed as liars through two “syndromes”: Summit’s (1983) child sexual abuse accommodation syndrome (CSAAS) and false memory syndrome (FMS), which emerged in the early 1990s. Both “syndromes” are argued to medicalize girls’ and women’s behaviour when they speak out about their experiences of sexual abuse. This constructs girls (and women) as not believable in their disclosures of abuse and in the case of FMS, susceptible to being implanted with “memories” of CSA by counselling professionals. During this time period, from about the 1980s to mid-1990s, boys are discussed in the literature as being more credible in their disclosures of abuse when they have suffered physical trauma, which is most often inflicted by male perpetrators (Spencer & Dunklee, 1986). Critiques of this literature, however, argue that conceptualizing boy victims in this way ignores female-perpetrated sexual abuse because such gender pairings are often reported as less invasive and physically traumatising than male-perpetrated CSA (Finkelhor, 1979, 1984; Trocmé & Wolfe, 2001). Research also suggests that boys sexually abused by women are not viewed as credible in their disclosures of sexual abuse because of patriarchal expectations for boys to seize sexual experiences with women rather be victimized by them. Despite this literature’s discussion of the different ways that victims are portrayed, research examining whether perpetrator-victim relationships influence counsellors’ views of victims does not exist.

I combined the use of feminist works on CSA with a mixed methods approach to identify whether counsellors’ views differed based on perpetrator-victim and counsellor

characteristics. A total of 149 counsellors surveyed by mail and over the internet read a vignette describing an incident of CSA, completed a 12-question survey along a 7 point Likert-type scale, responded to 2 open-ended discussion questions, and completed a demographic survey. A descriptive analysis of the data suggested associations between certain independent and dependent variables. A correlation analysis (Spearman's Rank Order) and measure of variability (eta-squared) were used to examine this possibility further. Results suggested moderate negative relationships between: (i) victim gender and victim responsibility, and (ii) years of counselling experience and victim credibility exist. Next, a logistic regression analysis was used to assess the predictability of the independent variables individually (Wald statistic) and as a group (Goodness-of-fit Test) to explore whether the relationships raised by the correlation analysis exist in the larger population of counsellors from which the sample was drawn. The mutual sharing of information between counsellors' comments about challenges met in their own careers, paired with the logistic regression statistics, illustrates that it is possible for feminist scholarship to incorporate a mixed methodology.

The results offer three significant findings. First, victim gender predicts counsellors' views of boys as more responsible for their victimization than girls. Importantly, this finding contradicts both the use of patriarchy as a theory to understand perceptions of sexually abused boys and the early literature's discussion of boys as victims. By borrowing from intersectional feminist literature and problematizing gender by considering factors such as race and age as mediating relationships of power based on sex, the thesis challenges patriarchal theories of CSA and perceptions of perpetrator-victim relationships based on male sexual entitlement, male oppression and female

subordination. The analysis also found that more years of counselling experience predicts counsellors' likelihood to disbelieve children's allegations of sexual abuse and that more years of experience working with CSA clients predicts counsellors' views of children as truthful in their disclosures of sexual abuse.

Throughout the process of researching and writing this thesis, relatives and friends would often ask me why I chose this topic to research. I quickly learned that their curiosity was not for their lack of compassion about children who had experienced sexual abuse, but that they wanted to know why a person such as myself who grew up knowing nothing of such harms would want to research this topic. How could I relate, they asked. Part of me agreed, I could not relate. Much of the fascinating early and contemporary feminist material I read for this thesis consisted of women raising awareness about CSA and incest often beginning with their own childhood experiences of abuse, or recounting how a friend's victimization motivated them to pursue studies and careers devoted to incest and CSA survivors. All of these authors are completely passionate and deliver strong messages through their works, and although some accounts were quite descriptive and difficult to read at times, I knew that each and every experience I read was real.

The prevalence of incest and CSA reported by authors surprised me and once I became aware of not only how common they were, but more so of the history of denial and minimization associated with incest and CSA, I equated not contributing to this emerging research area with ignoring its existence. Furthermore, their knowledge of how to use their negative experiences to strengthen themselves and others by telling their stories impressed me and made me want to learn more about how they turned such a negative experience into professional careers as psychiatrists, writers, professors and

activists. It also occurred to me that these are the brave women who put their stories out there for others to learn and gain strength from. How many more stories have yet to be told?

I have also learned that more research is needed in this area to raise public awareness about how common CSA and incest are and about children's portrayal as responsible for their victimization and not credible in their disclosures of abuse. Through this thesis I believe that I have encouraged a greater awareness of traditionally unspoken harms against children in an effort to guard against their occurrence and to question whether those who would portray children as responsible or as liars further their victimization.

This research has explored and identified counsellors' views of victim responsibility and credibility. Also of interest, but not addressed in this thesis, is why counsellors view boys as more responsible than girls. This thesis represents the first step in exploring *why* counsellors' hold different views and can be used to build a better understanding of the extent to which counsellors' views of CSA victims can simultaneously change and be changed by the children they work with. For this reason, future research is well advised to explore not only how one set of variables influences another, but how the two may be interdependent and reflect larger social struggles and issues.

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## Appendix A: Online Invitation Email

This is a research project designed to assess counsellors' perceptions on working with child survivors of sexual abuse. Most previous research in the area of perceptions about sexually abused children has involved surveys of undergraduate students and very little research has been conducted with experts such as counsellors who form a professional relationship with the clients they counsel. For this reason, I am interested in your thoughts and perceptions about child sexual abuse survivors. Literature indicates a number of concerns about the difficulties of working with this type of client and it is anticipated that my research will contribute in practical ways to the literature discussions and to the development of our knowledge of these issues.

I am a master's student in the Department of Criminology at Saint Mary's University in Halifax, Nova Scotia. As part of my master's thesis, I am conducting a nation-wide research study under the supervision of Dr. Sandra Bell and I am inviting you to participate in my online survey. Your name and email address have been obtained from the on-line membership directory of the Canadian Counselling Association.

The survey will only take 10 minutes of your time and consists of three parts: a short vignette (Part I), a 12-question survey and two short answer questions about the vignette (Part II), and a 5-question survey about yourself (Part III). Your participation is completely voluntary and your responses will remain confidential and anonymous.

This link will open the online survey in a new window: \_\_\_\_\_.

If you prefer to receive a paper version of the survey, please click on the above link and select "send me a paper version" and one will be mailed to you shortly.

After you complete the online survey you will have the option to request the results from my research by completing the Request Results Form.

Your participation in this study is appreciated.

Sincerely,

Alanna Howell  
MA Candidate

## Appendix A (cont'd): Online Invitation Email

Potential participants were emailed one of the following internet links to access a participation package online:

Survey 1: <http://husky1.smu.ca/~s6550362/survey1/study1page1.htm>

Survey 2: <http://husky1.smu.ca/~s6550362/survey2/study1page1.htm>

Survey 3: <http://husky1.smu.ca/~s6550362/survey3/study1page1.htm>

Survey 4: <http://husky1.smu.ca/~s6550362/survey4/study1page1.htm>

Survey 5: <http://husky1.smu.ca/~s6550362/survey5/study1page1.htm>

Survey 6: <http://husky1.smu.ca/~s6550362/survey6/study1page1.htm>

Survey 7: <http://husky1.smu.ca/~s6550362/survey7/study1page1.htm>

Survey 8: <http://husky1.smu.ca/~s6550362/survey8/study1page1.htm>

Survey 9: <http://husky1.smu.ca/~s6550362/survey9/study1page1.htm>

Survey 10: <http://husky1.smu.ca/~s6550362/survey10/study1page1.htm>

Survey 11: <http://husky1.smu.ca/~s6550362/survey11/study1page1.htm>

Survey 12: <http://husky1.smu.ca/~s6550362/survey12/study1page1.htm>

## Appendix B: Online Consent Form

Welcome to the Online Survey

Thank you for choosing to participate in my research study. As previously stated in my invitation email this is a research project designed to assess counsellors' perceptions on working with child survivors of sexual abuse. I am a master's student in the Department of Criminology at Saint Mary's University in Halifax, Nova Scotia. As part of my master's thesis, I am conducting a nation-wide research study under the supervision of Dr. Sandra Bell and you have been selected to participate in my online survey.

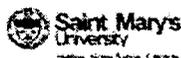
Two links appear at the bottom of this screen. One lets you complete the survey online and the other indicates you would prefer to receive a paper version of the survey. This will be mailed to you along with a postage paid return envelope for your convenience. The online survey will take about 10 minutes and consists of three parts: a short vignette to read (Part I), a 12-question survey and two short answer questions about the vignette (Part II), and a 5-question survey about yourself (Part III).

**Please complete the survey at your earliest convenience. Your participation is completely voluntary and you may choose to discontinue participation at any time.** Your responses will remain confidential and anonymous. Your confidentiality is ensured in that the online survey is protected by Saint Mary's University firewall. Furthermore, I am the only one who will have access to returned surveys. All printed materials will be kept locked in a filing cabinet that is only accessible by myself. Your name will not be linked to your survey responses and you will not be asked to type your name anywhere on this survey. Furthermore, the results of this study will be presented as group results and individual participants will not be identified. In these ways, your responses are absolutely anonymous.

- By clicking this box you are indicating that you fully understand the above information and consent to participate in this study.

COMPLETE ONLINE SURVEY NOW

SEND ME A PAPER VERSION



Contact Me

## Appendix C: Paper Version of Consent Form

**INFORMED CONSENT FORM***Counsellors' Perspectives on Working With Child Sexual Abuse Clients**Alanna Howell, MA Candidate***Department of Criminology****Saint Mary's University****Halifax, NS B3H 3C3**

This is a research project designed to assess counsellors' perceptions on working with child survivors of sexual abuse. Most previous research in the area of perceptions about sexually abused children has involved surveys of undergraduate students and very little research has been conducted with experts such as counsellors who form a professional relationship with the clients they counsel. For this reason, I am interested in your thoughts and perceptions about child sexual abuse survivors. Literature indicates a number of concerns about the difficulties of working with this type of client and it is anticipated that my research will contribute in practical ways to the literature discussions and to the development of our knowledge of these issues.

I am a master's student in the Department of Criminology at Saint Mary's University in Halifax, Nova Scotia. As part of my master's thesis, I am conducting a nation-wide research study under the supervision of Dr. Sandra Bell and I am inviting you to participate in my survey. Your contact information has been obtained from the on-line membership directory of the Canadian Counselling Association.

The survey will take about 10 minutes and consists of three parts to be completed in the order that they are presented here: a short vignette for you to read (Part I), followed by a 12-question survey and two short answer questions about the vignette (Part II), and finally a 5-question survey about yourself (Part III).

**Please complete the survey at your earliest convenience. Your participation is completely voluntary and you may choose to discontinue participation at any time.**

Your responses will remain confidential and anonymous. Your confidentiality is ensured in that all printed materials will be kept in a locked filing cabinet that is only accessible by me. Your name will not be linked to your survey responses and you will not be asked to write your name anywhere on this survey. Furthermore, the results of this study will be presented as group results and individual participants will not be identified. In these ways, your responses are absolutely anonymous.

Upon completing the survey, please return all materials to me in the self-addressed postage paid envelop provided. If you would like to receive the results of this study please complete the Request Results Form and seal it in the white envelop marked "Request Results" and include it in the larger envelop to be returned to me. If you do not wish to receive the results then simply disregard the form.

This research has been reviewed and approved by the Saint Mary's University Research Ethics Board. If you have any questions or concerns about the study, you may contact Dr. John Young, Chair, Research Ethics Board at [ethics@smu.ca](mailto:ethics@smu.ca).

**Your participation in this study is appreciated.**

**By signing this consent form, you are indicating that you fully understand the above information and agree to participate in this study.**

**Participant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Appendix D: 12 Vignette Versions (mother-daughter)

<p><b><u>PART I:</u></b>     <b>Vignette</b> Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.</p>
--

Rachel is Caucasian and lives in a middle-class neighbourhood with her parents; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, when Rachel's father was called into work, she was home alone with her mother Cathy. Rachel was sitting on the sofa watching TV when Cathy walked into the room. She smiled at her mother and then turned her attention back to her TV show.

Cathy sat down beside her and the two of them began talking. Cathy then placed her hand on Rachel's leg and began rubbing it. Next, Cathy began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Cathy told her to lie down on the sofa, telling her that they would play a fun game. Cathy continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Cathy to stop. Cathy continued rubbing Rachel's body and then made Rachel put her hand inside Cathy's pants. Rachel tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went to her room for the rest of the day and did not tell anyone about what happened with her mother until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (father-daughter)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Rachel is Caucasian and lives in a middle-class neighbourhood with her parents; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, when Rachel's mother was called into work, she was home alone with her father Keith. Rachel was sitting on the sofa watching TV when Keith walked into the room. She smiled at her father and then turned her attention back to her TV show.

Keith sat down beside her and the two of them began talking. Keith then placed his hand on Rachel's leg and began rubbing it. Next, Keith began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Keith told her to lie down on the sofa, telling her that they would play a fun game. Keith continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Keith to stop. Keith continued rubbing Rachel's body and then made Rachel put her hand inside Keith's pants. Rachel tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went to her room for the rest of the day and did not tell anyone what happened with her father until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (stepmother-stepdaughter)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Rachel is Caucasian and lives in a middle-class neighbourhood with her father and step-mother; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, when Rachel's father was called into work, she was home alone with her step-mother Cathy. Rachel was sitting on the sofa watching TV when Cathy walked into the room. She smiled at her step-mother and then turned her attention back to her TV show.

Cathy sat down beside her and the two of them began talking. Cathy then placed her hand on Rachel's leg and began rubbing it. Next, Cathy began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Cathy told her to lie down on the sofa, telling her that they would play a fun game. Cathy continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Cathy to stop. Cathy continued rubbing Rachel's body and then made Rachel put her hand inside Cathy's pants. Rachel tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went to her room for the rest of the day and did not tell anyone about what happened with her step-mother until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (stepfather-stepdaughter)

<p><b><u>PART I:</u></b>     <b>Vignette</b> Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.</p>
--

Rachel is Caucasian and lives in a middle-class neighbourhood with her mother and step-father; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, when Rachel's mother was called into work, she was home alone with her step-father Keith. Rachel was sitting on the sofa watching TV when Keith walked into the room. She smiled at her step-father and then turned her attention back to her TV show.

Keith sat down beside her and the two of them began talking. Keith then placed his hand on Rachel's leg and began rubbing it. Next, Keith began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Keith told her to lie down on the sofa, telling her that they would play a fun game. Keith continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Keith to stop. Keith continued rubbing Rachel's body and then made Rachel put her hand inside Keith's pants. Rachel tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went to her room for the rest of the day and did not tell anyone about what happened with her step-father until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (female teacher-female student)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Rachel is Caucasian and lives in a middle-class neighbourhood with her parents; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, Rachel volunteered to stay after school to help her teacher Cathy set up for carnival day at their high school. Rachel was hanging streamers in her classroom when Cathy walked into the room. Rachel smiled at her teacher and then turned her attention back to hanging the streamers.

Cathy stood beside her and the two of them began talking. Cathy then placed her hands on Rachel's shoulders and began rubbing them. Next, Cathy began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Cathy told her that they would play a fun game. Cathy continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Cathy to stop. Cathy continued rubbing Rachel's body and then made Rachel put her hand inside Cathy's pants. Rachel tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went home and did not tell anyone about what happened with her teacher until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (male teacher-female student)

<p><b><u>PART I:</u></b> <i>Vignette</i> Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.</p>
--

Rachel is Caucasian and lives in a middle-class neighbourhood with her parents; she is 12 years old and in the seventh grade. Imagine that you are talking privately with Rachel who reveals to you the following story, which is narrated in the third person:

One day, Rachel volunteered to stay after school to help her teacher Keith set up for carnival day at their high school. Rachel was hanging streamers in her classroom when Keith walked into the room. Rachel smiled at her teacher and then turned her attention back to hanging the streamers.

Keith stood beside her and the two of them began talking. Keith then placed his hands on Rachel's shoulders and began rubbing them. Next, Keith began rubbing the rest of her body including her private parts. Rachel was not sure what to do but said that it felt good.

At this point in the story, Rachel pauses. You then gently ask her what happened next.

Rachel reveals that Keith told her that they would play a fun game. Keith continued to rub Rachel's body and then undressed her. At this point Rachel felt uncomfortable and told Keith to stop. Keith continued rubbing Rachel's body and then made Rachel put her hand inside Keith's pants. Rachel tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Rachel not to tell anyone about what had happened. Rachel then tells you that she went home and did not tell anyone about what happened with her teacher until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (mother-son)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his parents; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, when Robert's father was called into work, he was home alone with his mother Cathy. Robert was sitting on the sofa watching TV when Cathy walked into the room. He smiled at his mother and then turned his attention back to his TV show.

Cathy sat down beside him and the two of them began talking. Cathy then placed her hand on Robert's leg and began rubbing it. Next, Cathy began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Cathy told him to lie down on the sofa, telling him that they would play a fun game. Cathy continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Cathy to stop. Cathy continued rubbing Robert's body and then made Robert put his hand inside Cathy's pants. Robert tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went to his room for the rest of the day and did not tell anyone about what happened with his mother until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (father-son)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his parents; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, when Robert's mother was called into work, he was home alone with his father Keith. Robert was sitting on the sofa watching TV when Keith walked into the room. He smiled at his father and then turned his attention back to his TV show.

Keith sat down beside him and the two of them began talking. Keith then placed his hand on Robert's leg and began rubbing it. Next, Keith began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Keith told him to lie down on the sofa, telling him that they would play a fun game. Keith continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Keith to stop. Keith continued rubbing Robert's body and then made Robert put his hand inside Keith's pants. Robert tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went to his room for the rest of the day and did not tell anyone about what happened with his father until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (stepmother-stepson)

**PART I:**     **Vignette**  
Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his father and step-mother; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, when Robert's father was called into work, he was home alone with his step-mother Cathy. Robert was sitting on the sofa watching TV when Cathy walked into the room. He smiled at his step-mother and then turned his attention back to his TV show.

Cathy sat down beside him and the two of them began talking. Cathy then placed her hand on Robert's leg and began rubbing it. Next, Cathy began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Cathy told him to lie down on the sofa, telling him that they would play a fun game. Cathy continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Cathy to stop. Cathy continued rubbing Robert's body and then made Robert put his hand inside Cathy's pants. Robert tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went to his room for the rest of the day and did not tell anyone about what happened with his step-mother until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (stepfather-stepson)

**PART I:** **Vignette**  
Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his mother and step-father; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, when Robert's mother was called into work, he was home alone with his step-father Keith. Robert was sitting on the sofa watching TV when Keith walked into the room. He smiled at his step-father and then turned his attention back to his TV show.

Keith sat down beside him and the two of them began talking. Keith then placed his hand on Robert's leg and began rubbing it. Next, Keith began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Keith told him to lie down on the sofa, telling him that they would play a fun game. Keith continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Keith to stop. Keith continued rubbing Robert's body and then made Robert put his hand inside Keith's pants. Robert tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went to his room for the rest of the day and did not tell anyone about what happened with his step-father until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (female teacher-male student)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his parents; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, Robert volunteered to stay after school to help his teacher Cathy set up for carnival day at their high school. Robert was hanging streamers in his classroom when Cathy walked into the room. Robert smiled at his teacher and then turned his attention back to hanging the streamers.

Cathy stood beside him and the two of them began talking. Cathy then placed her hands on Robert's shoulders and began rubbing them. Next, Cathy began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Cathy told him that they would play a fun game. Cathy continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Cathy to stop. Cathy continued rubbing Robert's body and then made Robert put his hand inside Cathy's pants. Robert tried to get away but Cathy was too strong.

After a while Cathy said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went home and did not tell anyone about what happened with his teacher until just now.

**Please answer the questions on the following page.**

## Appendix D (cont'd): 12 Vignette Versions (male teacher-male student)

**PART I:****Vignette**

Please read the following description of a hypothetical incident that may come to the attention of a counsellor and respond to the questions that follow.

Robert is Caucasian and lives in a middle-class neighbourhood with his parents; he is 12 years old and in the seventh grade. Imagine that you are talking privately with Robert who reveals to you the following story, which is narrated in the third person:

One day, Robert volunteered to stay after school to help his teacher Keith set up for carnival day at their high school. Robert was hanging streamers in his classroom when Keith walked into the room. Robert smiled at his teacher and then turned his attention back to hanging the streamers.

Keith stood beside him and the two of them began talking. Keith then placed his hands on Robert's shoulders and began rubbing them. Next, Keith began rubbing the rest of his body including his private parts. Robert was not sure what to do but said that it felt good.

At this point in the story, Robert pauses. You then gently ask him what happened next.

Robert reveals that Keith told him that they would play a fun game. Keith continued to rub Robert's body and then undressed him. At this point Robert felt uncomfortable and told Keith to stop. Keith continued rubbing Robert's body and then made Robert put his hand inside Keith's pants. Robert tried to get away but Keith was too strong.

After a while Keith said it was time to quit playing the game and told Robert not to tell anyone about what had happened. Robert then tells you that he went home and did not tell anyone about what happened with his teacher until just now.

**Please answer the questions on the following page.**









## Appendix F: Online Response Confirmation Page: Complete Missing Questions

**PART  
II:****Survey Questions Incomplete!**

It appears that the survey questions were not fully completed...

Question 4 was not answered.  
Question 7 was not answered.  
Question 10 was not answered.

Please press the BACK button to return to the survey and answer the missing questions.



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## Appendix G: Online Response Confirmation Page: Proceed to Next Section

### Confirmation of Responses

If the short answer questions are completed to your satisfaction, press the NEXT button to proceed.

Otherwise, press the BACK button to return to the short answer questions.



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## Appendix H : Open-ended Questions

**PART II****(continued)**:**Short Answer Questions**

Please respond to the questions below in the space provided. Your responses will remain anonymous and confidential and you are free to end your participation in the survey at any time.

**(1) What factors led you to answer the way that you did? Please explain.**

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**(2) If you have additional comments to the hypothetical incident described in the vignette please write them here.**

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## Appendix I: Demographic Survey

**Part III:****Demographic & Background Information**

Finally, please answer the following questions that pertain to background information about you.

1. Gender:     Female  
                   Male

2. How many years have you been working as a counsellor? \_\_\_\_\_

3. What is your area of specialization?

\_\_\_\_\_

4. Do you have experience counselling children who have been sexually abused?

- No  
 Yes, I have \_\_\_\_\_ years of experience.

5. In which province do you currently work?

- Newfoundland / Labrador  
 PEI  
 Nova Scotia  
 New Brunswick  
 Quebec  
 Ontario  
 Manitoba  
 Saskatchewan  
 Alberta  
 BC

Thank you for your cooperation.

## Appendix J: Request Results Form

Request Results Form

Upon completion of my research I will email you a website address where I will post a summary of: (i) the initial purpose, objectives and research questions addressed by my research and (ii) the outcomes of my research.

Please send me the website link at the following email address:

---

Alternatively, if you would like to receive a one-page information sheet describing my research results, please complete the following contact information:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Province/Territory: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

Appendix K: Correlation Matrix (testing for multicollinearity among predictor variables)

	Constant	PV RELATIONSHIP	VGENDER	PGENDER	CSA TYPE	CGENDER	YEARS EXP	SPECIALIZATION	YEARS CSA EXP
Constant	1.000								
PV RELATIONSHIP	-.458	1.000							
VGENDER	-.219	.037	1.000						
PGENDER	-.237	.077	-.124	1.000					
CSA TYPE	-.153	-.076	.040	-.084	1.000				
CGENDER	-.484	-.061	.074	-.134	-.023	1.000			
YEARS EXP	-.328	-.066	.077	.031	-.005	.133	1.000		
SPECIALIZATION	-.488	-.057	-.143	.168	-.016	.044	.008	1.000	
YRS CSA EXP	-.066	.111	-.007	.016	-.063	.054	-.487	.012	1.000



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## **Research Ethics Board Certificate Notice**

The Saint Mary's University Research Ethics Board has issued an REB certificate related to this thesis. The certificate number is: **06-083**

A copy of the certificate is on file at:

Saint Mary's University, Archives  
Patrick Power Library  
Halifax, NS  
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